Fill in this information to identify your case:	
United States Bankruptcy Court for the: Eastern District of California	
Case number (If known):	Chapter you are filing under: Chapter 7 Chapter 11 Chapter 12 Chapter 13

# ☐ Check if this is an amended filing

### Official Form 101

### **Voluntary Petition for Individuals Filing for Bankruptcy**

04/20

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1:	Identify	Yourself

	About Debtor 1:		About Debtor 2 (Spouse Only in a Joint Case):		
1.	Your full name				
	Write the name that is on your government-issued picture	Davina			
	identification (for example, your driver's license or	First name	First name		
	passport).	Middle name	Middle name		
	Bring your picture	Calavano			
	identification to your meeting with the trustee.	Last name	Last name		
		Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)		
2.	All other names you	Davina			
	have used in the last 8	First name	First name		
	years	Marie	ristriane		
	Include your married or	Middle name	Middle name		
	maiden names.	Calavano			
		Last name	Last name		
		First name	First name		
		Middle name	Middle name		
		Last name	Last name		
3.	Only the last 4 digits of	xxx - xx - <u>3</u> <u>1</u> <u>1</u> <u>8</u>	xxx - xx		
	your Social Security number or federal				
	Individual Taxpayer	OR	OR		
	Identification number	9 xx - xx	9 xx - xx		
	(ITIN)				

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Debtor 1 Davina Calavano Case number (if known) Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	☐ I have not used any business names or EINs.  Davina Calavano  Business name	I have not used any business names or EINs.
	Include trade names and doing business as names	Davina Custom Delights  Business name	Business name
		EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		6812 Bender Court  Number Street	Number Street
		Sacramento CA 95820 City State ZIP Code	City State ZIP Code
		Sacramento County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		P.O. Box	P.O. Box
		City State ZIP Code	City State ZIP Code
6.	Why you are choosing this district to file for bankruptcy	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)	Check one:  Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1 Davina Calavano Case number (if known)\_\_\_\_\_

Pa	art 2: Tell the Court Abou	t Your B	ankrup	otcy Case			
7.	The chapter of the Bankruptcy Code you	Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.					
	are choosing to file under	☐ Chap	oter 7				
	under	☐ Chap	ter 11				
		☐ Chap	ter 12				
		☑ Chap	ter 13				
8.	How you will pay the fee	local yours subn with	vill pay the entire fee when I file my petition. Please check with the clerk's office in your cal court for more details about how you may pay. Typically, if you are paying the fee burself, you may pay with cash, cashier's check, or money order. If your attorney is ubmitting your payment on your behalf, your attorney may pay with a credit card or check ith a pre-printed address.  need to pay the fee in installments. If you choose this option, sign and attach the oplication for Individuals to Pay The Filing Fee in Installments (Official Form 103A).				y, if you are paying the fee order. If your attorney is pay with a credit card or check tion, sign and attach the
		☐ I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the <i>Application to Have the Chapter 7 Filing Fee Waived</i> (Official Form 103B) and file it with your petition.					
9.	Have you filed for bankruptcy within the last 8 years?	☐ No ☑ Yes.	District		hen hen	11/14/2016 MM / DD / YYYY MM / DD / YYYY	Case number  Case number  Case number
10.	Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☑ No ☐ Yes.	District  Debtor	Wh	hen	MM / DD / YYYY	Relationship to you  Case number, if known  Relationship to you  Case number, if known
11.	Do you rent your residence?	☐ No. ☐ Yes.	No Yes	our landlord obtained an eviction j			Against You (Form 101A) and file it as

Debtor 1 Davina Calavano Case number (if known)\_\_\_\_\_

Pa	rt 3: Report About Any B	Businesses You Own as a Sole	Proprietor			
12.	Are you a sole proprietor	☑ No. Go to Part 4.				
	of any full- or part-time business?	☐ Yes. Name and location of busin	ess			
	A sole proprietorship is a					
	business you operate as an individual, and is not a separate legal entity such as	Name of business, if any				
	a corporation, partnership, or LLC.	Number Street				
	If you have more than one sole proprietorship, use a separate sheet and attach it					
	to this petition.	City	State	ZIP Code		
		Check the appropriate box	to describe your business:			
		☐ Health Care Business (as defined in 11 U.S.C. § 101(27A))				
		☐ Single Asset Real Estat	)			
		☐ Stockbroker (as defined	I in 11 U.S.C. § 101(53A))			
		☐ Commodity Broker (as	defined in 11 U.S.C. § 101(6))			
		None of the above				
13.	Are you filing under Chapter 11 of the Bankruptcy Code, and are you a small business debtor or a debtor as	choosing to proceed under Subchap are a small business debtor or you a most recent balance sheet, stateme	If you are filing under Chapter 11, the court must know whether you are a small business debtor or a debtor choosing to proceed under Subchapter V so that it can set appropriate deadlines. If you indicate that you are a small business debtor or you are choosing to proceed under Subchapter V, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).			
	defined by 11 U.S. C. §	No. I am not filing under Chapter 11.				
	1182(1)? For a definition of <i>small</i>	☐ No. I am filing under Chapter 11 the Bankruptcy Code.	1, but I am NOT a small business debt	or according to the definition in		
	business debtor, see 11 U.S.C. § 101(51D).		1, I am a small business debtor accord	•		
			to proceed under Subchapter V of Cha 1, I am a debtor according to the defin	•		
			pose to proceed under Subchapter V o			

Debtor 1	Davina First Name M		Jalavano  Last Name		Case number (if known)
Part 4:	Report if You	ı Own or Have	Any Hazardous Prop	erty or Any	Property That Needs Immediate Attention
14. Do you	own or have	any 🔽 No			
alleged of imm identifi public Or do y proper	ty that poses I to pose a th inent and able hazard t health or safe ou own any ty that needs iate attention	reat Yes. to ety?			v is it needed?
perishab that mus	mple, do you ow ole goods, or live of be fed, or a bu ds urgent repain	estock uilding	Where is the property?	Number	Street

City

State

ZIP Code

Debtor 1

Davina

Middle Name

Calavano

Case number (if known)	
------------------------	--

Part 5:

#### **Explain Your Efforts to Receive a Briefing About Credit Counseling**

 Tell the court whether you have received a briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About	De	btor	1	
-------	----	------	---	--

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing	about
credit counseling because of:	

☐ Incapacity. I have a mental illness or a mental deficiency that makes me

incapable of realizing or making rational decisions about finances.

☐ **Disability.** My physical disability causes me to be unable to participate in a

to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

#### About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

 ☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

□ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

Į	I am not required to receive a briefing about
	credit counseling because of:

■ Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability. My physical disability causes me to be unable to participate in a

briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Certificate Number: 15725-CAE-CC-035278996



## **CERTIFICATE OF COUNSELING**

I CERTIFY that on <u>January 18, 2021</u>, at <u>3:24</u> o'clock <u>PM EST</u>, <u>Davina Calavano</u> received from <u>001 Debtorce</u>, <u>Inc.</u>, an agency approved pursuant to 11 U.S.C. 111 to provide credit counseling in the <u>Eastern District of California</u>, an individual [or group] briefing that complied with the provisions of 11 U.S.C. 109(h) and 111.

A debt repayment plan <u>was not prepared</u>. If a debt repayment plan was prepared, a copy of the debt repayment plan is attached to this certificate.

This counseling session was conducted by internet.

Date: January 18, 2021 By: /s/Astrid Barreto

Name: Astrid Barreto

Title: Counselor

\* Individuals who wish to file a bankruptcy case under title 11 of the United States Bankruptcy Code are required to file with the United States Bankruptcy Court a completed certificate of counseling from the nonprofit budget and credit counseling agency that provided the individual the counseling services and a copy of the debt repayment plan, if any, developed through the credit counseling agency. *See* 11 U.S.C. 109(h) and 521(b).

Debtor 1 Davina Calavano Case number (if known) Case number (if known)

Part 6: Answer These Ques	stions for Reporting Purpose	s				
16. What kind of debts do you have?	16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."					
you navo.	<ul><li>No. Go to line 16b.</li><li>✓ Yes. Go to line 17.</li></ul>					
			ess debts are debts that you incurred to obtain ion of the business or investment.			
	<ul><li>□ No. Go to line 16c.</li><li>□ Yes. Go to line 17.</li></ul>					
	16c. State the type of debts you c	owe that are not consumer de	bts or business debts.			
17. Are you filing under Chapter 7?	✓ No. I am not filing under Cha	pter 7. Go to line 18.	<del></del>			
Do you estimate that after	☐ Yes. I am filing under Chapter	7. Do you estimate that after	any exempt property is excluded and ailable to distribute to unsecured creditors?			
any exempt property is excluded and	□ No					
administrative expenses are paid that funds will be	☐ Yes					
available for distribution to unsecured creditors?						
18. How many creditors do	<b>2</b> 1-49	1,000-5,000	25,001-50,000			
you estimate that you owe?	<b>50-99</b>	5,001-10,000	50,001-100,000			
owe?	☐ 100-199 ☐ 200-999	10,001-25,000	☐ More than 100,000			
19. How much do you	<b>2</b> \$0-\$50,000	□ \$1,000,001-\$10 million				
estimate your assets to be worth?	\$50,001-\$100,000	\$10,000,001-\$50 millio				
De Wortin:	□ \$100,001-\$500,000 □ \$500,001-\$1 million	□ \$50,000,001-\$100 mil □ \$100,000,001-\$500 m				
20. How much do you	□ \$0-\$50,000	□ \$1,000,001-\$10 million				
estimate your liabilities	\$50,001-\$100,000	\$10,000,001-\$10 million				
to be?	\$100,001-\$500,000	\$50,000,001-\$100 mil				
	□ \$500,001-\$1 million	□ \$100,000,001-\$500 m	illion			
Part 7: Sign Below						
For you	I have examined this petition, and correct.	I I declare under penalty of pe	rjury that the information provided is true and			
	If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.					
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).					
	I request relief in accordance with	the chapter of title 11, United	States Code, specified in this petition.			
	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.					
	🗶 /s/ Davina Calavano	<b>×</b>				
	Signature of Debtor 1 - Davina	a Calavano	Signature of Debtor 2			
	Executed on 01/20/2021 Executed on MM / DD / YYYY					

Debtor 1	Davina First Name Middle Name	Calavano Last Name	Case number (if known)	
If you are by an atto	attorney, if you are red by one not represented orney, you do not le this page.	to proceed under Chapter 7, 11, 12, of available under each chapter for which the notice required by 11 U.S.C. § 34	d in this petition, declare that I have info or 13 of title 11, United States Code, and the person is eligible. I also certify the 2(b) and, in a case in which § 707(b)(4) formation in the schedules filed with the	d have explained the relief at I have delivered to the debtor(s) (D) applies, certify that I have no
		Mark Shmorgon Printed name  Law Offices of Mark Shmo Firm name  5015 Madison Ave., Suite Number Street	<del></del>	
		Sacramento City	CA State	95841 ZIP Code
		Contact phone (916) 640-7599	Email address	shmorgonlaw@gmail.com
		255939 Bar number	CA State	

Fill in this in	formation to identify yo	our case:	
Debtor 1	Davina		Calavano
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the: Ea	stern District of Californi	a
Case number	(If known)		

☐ Check if this is an amended filing

### Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information 12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

	Your assets Value of what you own
Schedule A/B: Property (Official Form 106A/B)  1a. Copy line 55, Total real estate, from Schedule A/B	<sub>\$</sub> 15,000.00
Ta. Copy line 55, Total feal estate, Ifoff Scredule Arb	·
1b. Copy line 62, Total personal property, from Schedule A/B	\$49,198.46
1c. Copy line 63, Total of all property on Schedule A/B	\$64,198.46
art 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$33,873.89
Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$0.00
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i>	+ \$132,621.44
Your total liabilities	\$166,495.33
art 3: Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I)	0.700.04
Copy your combined monthly income from line 12 of Schedule I	\$3,792.81
Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$ 2,742.81

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Debtor 1 Pavina Calavano Case number (if known) Case number (if known)

Pa	art 4: Answer These Questions for Administrative and Statistical Records	
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13?  No. You have nothing to report on this part of the form. Check this box and submit this form Yes	orm to the court with your other schedules.
7.	What kind of debt do you have?  ✓ Your debts are primarily consumer debts. Consumer debts are those "incurred by an family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purpose.  ✓ Your debts are not primarily consumer debts. You have nothing to report on this part this form to the court with your other schedules.	ses. 28 U.S.C. § 159.
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income 122A-1 Line 11; <b>OR</b> , Form 122B Line 11; <b>OR</b> , Form 122C-1 Line 14.	come from Official \$7,192.15
9.	Copy the following special categories of claims from Part 4, line 6 of <i>Schedule E/F</i> :	Total claim
	From Part 4 on Schedule E/F, copy the following:	
	9a. Domestic support obligations (Copy line 6a.)	\$0.00
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 62,377.00
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00
	9d. Student loans. (Copy line 6f.)	\$0.00
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$0.00
	9g. <b>Total</b> . Add lines 9a through 9f.	\$62,377.00

Fill in this in	formation to identify yo	our case and this filing:	
Debtor 1	Davina First Name	Middle Name	Calavano Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the: Ea	stern District of Californi	a
Case number			

### Official Form 106A/B

### **Schedule A/B: Property**

12/15

☐ Check if this is an amended filing

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

Describe Each Residence, Building,			
1. Do you own or have any legal or equitable intere	st in any residence, building, land, or similar prope	erty?	
☐ No. Go to Part 2.			
Yes. Where is the property?			
1.1. Disney Vacation Development, Inc. Street address, if available, or other description	What is the property? Check all that apply.  ☐ Single-family home  ☐ Duplex or multi-unit building	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	I claims on Schedule D:
1390 Celebration Blvd.	☐ Condominium or cooperative ☐ Manufactured or mobile home ☐ Land	Current value of the entire property?  \$\( 15,000.00 \)	Current value of the portion you own?  \$ 15,000.00
CelebrationFL34747CityStateZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature o	f your ownership
	Who has an interest in the property? Check one.	the entireties, or a life Fee Simple	estate), if known.
Osceola	☑ Debtor 1 only		
County	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another	Check if this is con (see instructions)	mmunity property
If you own or have more than one, list here:	Other information you wish to add about this it property identification number: <u>Deed Time S</u>	em, such as local Share / Hawaii / Disr	ey Vacation Club
1.2Street address, if available, or other description	What is the property? Check all that apply.  ☐ Single-family home ☐ Duplex or multi-unit building	Do not deduct secured cla the amount of any secured Creditors Who Have Claim	I claims on Schedule D:
Street address, if available, or other description	<ul><li>Condominium or cooperative</li><li>Manufactured or mobile home</li></ul>	Current value of the entire property?	Current value of the portion you own?
	Land	\$	\$
City State ZIP Code	☐ Investment property ☐ Timeshare ☐ Other	Describe the nature o interest (such as fee s the entireties, or a life	simple, tenancy by
	Who has an interest in the property? Check one.		
County	☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Check if this is con (see instructions)	mmunity property
	Other information you wish to add about this ite property identification number:	n, such as local	

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Case 21-20174

Doc 1

Davina Calavano Debtor 1 Case number (if known) What is the property? Check all that apply. Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: ☐ Single-family home Creditors Who Have Claims Secured by Property. Street address, if available, or other description ☐ Duplex or multi-unit building Current value of the Current value of the Condominium or cooperative entire property? portion you own? Manufactured or mobile home ☐ Land ■ Investment property Describe the nature of your ownership City State ZIP Code Timeshare interest (such as fee simple, tenancy by Other the entireties, or a life estate), if known. Who has an interest in the property? Check one. Debtor 1 only County Debtor 2 only Check if this is community property Debtor 1 and Debtor 2 only (see instructions) At least one of the debtors and another Other information you wish to add about this item, such as local property identification number: \_ 2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages 0.00 you have attached for Part 1. Write that number here. **Describe Your Vehicles** Part 2: Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases. 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles ☐ No ✓ Yes Jeep Who has an interest in the property? Check one. 3.1. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only Cherokee Creditors Who Have Claims Secured by Property. Model: Debtor 2 only 2018 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only entire property? portion you own? 90,000 Approximate mileage: ☐ At least one of the debtors and another Other information: 10,902.00 10,902.00 ☐ Check if this is community property (see 2018 Jeep Cherokee Latitude Sport Utility 4D / Clean Title / 90,000 Miles / Fair instructions) Condition If you own or have more than one, describe here: Who has an interest in the property? Check one. Husqvarna 3.2. Make: Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Debtor 1 only FC 250 Model: Creditors Who Have Claims Secured by Property. Debtor 2 only 2018 Year: Current value of the Current value of the Debtor 1 and Debtor 2 only Unknown entire property? portion you own? Approximate mileage: At lease one of the debtors and another Other information: 4,115.00 4,115.00 ☐ Check if this is community property (see 2018 Husqvarna FC 250 Motorcycle / Clean Title / Unknown Miles / Fair Condition instructions)

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Case 21-20174

Doc 1

Debtor 1 Davina Calavano Case number (if known) Case number (if known)

		Mayaaalaa			
3.3.	Make:	Mercedes	Who has an interest in the property? Check one.	Do not deduct secured cla the amount of any secure	
	Model:	C 300	☐ Debtor 1 only ☐ Debtor 2 only	Creditors Who Have Clair	
	Year:	2018	Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:	39,000	✓ At least one of the debtors and another	entire property?	portion you own?
	Other information:			. 27 025 00	s 27,935.00
	2018 Mercedes-Benz C-		☐ Check if this is community property (see	\$27,935.00	\$27,935.00
	Sedan 4D / Clean Title / Good Condition	39,000 Miles /	instructions)		
	Malia		Who has an interest in the property? Check one.	Do not doduct occured ale	ima ar avamentiana Dut
3.4.	Make:		Debtor 1 only	Do not deduct secured cla the amount of any secure	d claims on Schedule D:
	Model:		Debtor 2 only	Creditors Who Have Clair	ns Secured by Property.
	Year:		Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Approximate mileage:		☐ At least one of the debtors and another	entire property?	portion you own?
	Other information:			Φ	Φ
			Check if this is community property (see	<b>5</b>	Φ
			instructions)		
4. Wate	rcraft. aircraft. motor h	nomes. ATVs and oth	ner recreational vehicles, other vehicles, and access	sories	
	•	•	raft, fishing vessels, snowmobiles, motorcycle accessor		
<b>Ø</b> N	0	·			
□ Y					
4.1.	Make:		Who has an interest in the property? Check one.	Do not deduct secured cla	
	Model:		Debtor 1 only	the amount of any secure Creditors Who Have Clair	
	Year:		Debtor 2 only		
	Other information:		☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	Current value of the	Current value of the
			At least one of the debtors and another	entire property?	portion you own?
			☐ Check if this is community property (see	¢	\$
			instructions)	Φ	Φ
If you	own or have more than	one list here:			
•			Who has an interest in the property? Check one.	5	
4.2.	Make:		Debtor 1 only	Do not deduct secured cla the amount of any secure	d claims on <i>Schedule D:</i>
	Model:		Debtor 2 only	Creditors Who Have Clair	ns Secured by Property.
	Year:		Debtor 1 and Debtor 2 only	Current value of the	Current value of the
	Other information:		☐ At least one of the debtors and another	entire property?	portion you own?
				Φ	Φ
			Check if this is community property (see	Φ	\$
			instructions)		
		•	all of your entries from Part 2, including any entries		\$42,952.00
you h	nave attached for Part	∠. write that number	here	<b>→</b>	

Debtor 1

Davina

Calavano

Case number (if known)\_

Part 3: Describe Your Personal and Household Items

Do	you own or have any le	egal or equitable interest in any of the following items?	portion yo	uct secured claims
6.	Household goods and	furnishings		
	-	ces, furniture, linens, china, kitchenware		
	No Yes. Describe	Household Goods	\$	2,000.00
7.		nd radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music lectronic devices including cell phones, cameras, media players, games		
	Yes. Describe	Electronics	\$	1,000.00
8.	Collectibles of value		_	
		figurines; paintings, prints, or other artwork; books, pictures, or other art objects; or baseball card collections; other collections, memorabilia, collectibles		
		Books and Pictures	\$	500.00
9.		nd hobbies graphic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes carpentry tools; musical instruments		
	☐ No ☐ Yes. Describe	Sports and Hobby Equipment	\$	400.00
10.	<ul><li>Firearms</li><li>Examples: Pistols, rifles,</li><li>✓ No</li></ul>	shotguns, ammunition, and related equipment		
	☐ Yes. Describe		\$	0.00
11.	□ No	hes, furs, leather coats, designer wear, shoes, accessories		
	Yes. Describe	Wearing Apparel	\$	300.00
12.	Jewelry Examples: Everyday jew gold, silver	elry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems,		
	No Yes. Describe	Jewelry	\$	800.00
13.	Non-farm animals  Examples: Dogs, cats, b			
	No Yes. Describe		\$	0.00
14.	Any other personal and	household items you did not already list, including any health aids you did not list	_	
	<b>☑</b> No			
	Yes. Give specific information		\$	0.00
15.		all of your entries from Part 3, including any entries for pages you have attached	\$	5,000.00

Debtor 1

Davina

Middle Name

Calavano Last Name

Part 4:	Describe	Your	<b>Financ</b>

Do you own or have any	legal or equitable interest in	any of the following?		Current va portion yo Do not deduc or exemption	u own? ct secured claims
16. <b>Cash</b> Examples: Money you	have in your wallet, in your hon	ne, in a safe deposit box, and on hand when you	file your petition		
□ No	,	,	, , , , , , , , , , , , , , , , , , , ,		
<del></del>			Cash:	. \$	10.00
		unts; certificates of deposit; shares in credit union unltiple accounts with the same institution, list ea		,	
☐ No ☑ Yes		Institution name:			
	17.1. Checking account:	Wells Fargo Checking Account663	39	\$	322.63
	17.2. Checking account:	Wells Fargo Checking Account94	478	\$	0.00
	17.3. Savings account:	Wells Fargo Savings Account274	48	\$	0.00
	17.4. Savings account:			\$	
	17.5. Certificates of deposit:			\$	
	17.6. Other financial account:	CA EDD Card1661		\$	0.00
	17.7. Other financial account:			\$	
	17.8. Other financial account:			\$	
	17.9. Other financial account:			\$	
	Institution or issuer name: E-Trade Stock Accour	erage firms, money market accounts		_ \$	905.90
<ul> <li>19. Non-publicly traded s an LLC, partnership, a</li> <li>No</li> <li>Yes. Give specific</li> </ul>		rated and unincorporated businesses, includes e Proprietorship)	% of ownership:	\$	0.00
			%	¢.	
information about them				Φ	

Doc 1

Debtor 1

Davina First Name

Middle Name

Calavano Last Name

		er negotiable and non-negotiable instruments	
		cks, cashiers' checks, promissory notes, and money orders.  nnot transfer to someone by signing or delivering them.	
☑ No			
Yes. Give specific information about	Issuer name:		•
them			\$
			\$ \$
21. Retirement or pension Examples: Interests in II		01(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans	
, □ No			
Yes. List each account separately.	Type of account:	Institution name:	
account separatery.			¢
	401(k) or similar plan:		φ
	Pension plan:	E-Trade Roth IRA9302	\$ \$ 7.93
	IRA:	E-Trade Roth IRA9302	\$7.93
	Retirement account:		\$
	Keogh:		\$
	Additional account:		\$
	Additional account:		\$
	with landlords, prepa	nade so that you may continue service or use from a company id rent, public utilities (electric, gas, water), telecommunications stitution name or individual:	
<b>—</b> 103	Electric:	Suluion name of individual.	\$
	Gas:		\$ \$
	Heating oil:		\$
	Security deposit on re	ntal unit:	\$
	Prepaid rent:		\$
	Telephone:		\$
	Water:		\$
	Rented furniture:		\$
	Other:		\$
23. <b>Annuities</b> (A contract fo	or a periodic pavment	of money to you, either for life or for a number of years)	
☑ No			
☐ Yes	Issuer name and des	scription:	
			\$
			\$
			\$

Doc 1

page 7

Debtor 1

Davina

Middle Name

Calavano Last Name

	A, in an account in a qualified ABLE program, or under a qualified state	e tuition program.	
26 U.S.C. §§ 530(b)(1), 529A(	b), and 529(b)(1).		
☑ No			
☐ Yes	Institution name and description. Separately file the records of any interest	sts.11 U.S.C. § 521(c):	
			•
			\$
			\$
			\$
25. Trusts, equitable or future in exercisable for your benefit	terests in property (other than anything listed in line 1), and rights or	powers	
<b>☑</b> No			
☐ Yes. Give specific			
information about them			\$
26. Patents, copyrights, tradema	arks, trade secrets, and other intellectual property		
Examples: Internet domain na	mes, websites, proceeds from royalties and licensing agreements		
☑ No			
Yes. Give specific			
information about them			\$
'			
27. Licenses, franchises, and of			
Examples: Building permits, ex	xclusive licenses, cooperative association holdings, liquor licenses, profess	ional licenses	
☑ No			
Yes. Give specific			
information about them			\$
'			
Money or property owed to you	?	J	Current value of the
Money or property owed to you	?		Current value of the portion you own? Do not deduct secured
Money or property owed to you	?		portion you own?
Money or property owed to you 28. Tax refunds owed to you	1?		portion you own? Do not deduct secured
	1?		portion you own? Do not deduct secured
28. Tax refunds owed to you  No	tion	Fodoral C	portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  ☑ No ☐ Yes. Give specific informal about them, including	tion g whether	Federal: \$	portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  No Yes. Give specific informa about them, including you already filed the	tion g whether returns	Federal: \$	portion you own?  Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  ☑ No ☐ Yes. Give specific informal about them, including	tion g whether returns		portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  ✓ No  — Yes. Give specific informa about them, including you already filed the	tion g whether returns	State: \$	portion you own?  Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  ✓ No  — Yes. Give specific informa about them, including you already filed the	tion g whether returns	State: \$	portion you own?  Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  No Yes. Give specific informa about them, including you already filed the and the tax years	tion g whether returns	State: \$ Local: \$	portion you own?  Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  No Yes. Give specific informa about them, including you already filed the and the tax years	tion g whether returns	State: \$ Local: \$	portion you own?  Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  ✓ No  — Yes. Give specific informa about them, including you already filed the and the tax years  29. Family support  Examples: Past due or lump s	tion g whether returns  um alimony, spousal support, child support, maintenance, divorce settleme	State: \$ Local: \$	portion you own?  Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  ✓ No  ✓ Yes. Give specific informa about them, including you already filed the and the tax years  29. Family support  Examples: Past due or lump s	tion g whether returns  um alimony, spousal support, child support, maintenance, divorce settleme	State: \$ Local: \$	portion you own?  Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  ✓ No  — Yes. Give specific informa about them, including you already filed the and the tax years  29. Family support  Examples: Past due or lump s	tion g whether returns  um alimony, spousal support, child support, maintenance, divorce settleme tion	State: \$ Local: \$ nt, property settlement	portion you own?  Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  ✓ No  — Yes. Give specific informa about them, including you already filed the and the tax years  29. Family support  Examples: Past due or lump s	tion g whether returns  um alimony, spousal support, child support, maintenance, divorce settleme tion	State: \$ Local: \$ nt, property settlement	portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  ✓ No  — Yes. Give specific informa about them, including you already filed the and the tax years  29. Family support  Examples: Past due or lump s	tion g whether returns  um alimony, spousal support, child support, maintenance, divorce settleme tion	State: \$ Local: \$ Int, property settlement Alimony: Maintenance:	portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  ✓ No  — Yes. Give specific informa about them, including you already filed the and the tax years  29. Family support  Examples: Past due or lump s	tion g whether returns	State: \$ Local: \$ Int, property settlement Alimony: Maintenance: Support:	portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  ✓ No  Yes. Give specific informa about them, including you already filed the and the tax years  29. Family support  Examples: Past due or lump s  ✓ No  Yes. Give specific informa	tion g whether returns	State: \$ Local: \$ Int, property settlement  Alimony: Maintenance: Support: Divorce settlement:	portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  ✓ No  — Yes. Give specific informal about them, including you already filed the land the tax years  29. Family support  Examples: Past due or lump s  ✓ No  — Yes. Give specific informal	tion g whether returns  um alimony, spousal support, child support, maintenance, divorce settleme tion	State: \$ Local: \$ Int, property settlement  Alimony: Maintenance: Support: Divorce settlement:  Property settlement:	portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  ✓ No  ✓ Yes. Give specific informa about them, including you already filed the and the tax years  29. Family support  Examples: Past due or lump s  ✓ No  ✓ Yes. Give specific informa	tion g whether returns	State: \$ Local: \$ Int, property settlement  Alimony: Maintenance: Support: Divorce settlement:  Property settlement:	portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  ✓ No  — Yes. Give specific informal about them, including you already filed the land the tax years  29. Family support  Examples: Past due or lump s  ✓ No  — Yes. Give specific informal  30. Other amounts someone owe Examples: Unpaid wages, discord Security ber	tion g whether returns  um alimony, spousal support, child support, maintenance, divorce settleme  tion	State: \$ Local: \$ Int, property settlement  Alimony: Maintenance: Support: Divorce settlement:  Property settlement:	portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  ✓ No  Yes. Give specific informa about them, including you already filed the and the tax years  29. Family support  Examples: Past due or lump s  ✓ No  Yes. Give specific informa  30. Other amounts someone ow Examples: Unpaid wages, discoord Social Security ber	tion g whether returns	State: \$ Local: \$ Int, property settlement  Alimony: Maintenance: Support: Divorce settlement:  Property settlement:	portion you own? Do not deduct secured claims or exemptions.
28. Tax refunds owed to you  ✓ No  — Yes. Give specific informal about them, including you already filed the land the tax years  29. Family support  Examples: Past due or lump s  ✓ No  — Yes. Give specific informal  30. Other amounts someone owe Examples: Unpaid wages, discord Security ber	tion g whether returns	State: \$ Local: \$ Int, property settlement  Alimony: Maintenance: Support: Divorce settlement:  Property settlement:	portion you own? Do not deduct secured claims or exemptions.

Case 21-20174

Doc 1

Debtor 1 Davina
First Name

Calavano Last Name

31. Interests in insurance policies  Examples: Health, disability, or life insuran  ✓ No	ice; health savings account (HS	A); credit, homeowner's, or renter's insurance	
Yes. Name the insurance company of each policy and list its value	Company name:	Beneficiary:	Surrender or refund value:
o. cas., poney and not to talke			\$
			\$
			\$
32. Any interest in property that is due you If you are the beneficiary of a living trust, e property because someone has died.  ☑ No ☐ Yes. Give specific information	expect proceeds from a life insu	rance policy, or are currently entitled to receive	
Tes. Give specific information			\$
33. Claims against third parties, whether or Examples: Accidents, employment dispute  ✓ No  ✓ Yes. Describe each claim	es, insurance claims, or rights to		\$
34. Other contingent and unliquidated claim	ns of every nature, including	counterclaims of the debtor and rights	Ψ
to set off claims	is or every fluture, morading	ocumerolanic or the deptor and rights	
☑ No ☑ Yes. Describe each claim			
Tes. Describe each daim			\$
35. Any financial assets you did not already	/ list		
☑ No			
☐ Yes. Give specific information			\$
L			
36. Add the dollar value of all of your entrie for Part 4. Write that number here		entries for pages you have attached	\$1,246.46
Part 5: Describe Any Business-l	Related Property You (	Own or Have an Interest In. List any r	eal estate in Part 1.
37. Do you own or have any legal or equitab	ole interest in any business-re	elated property?	
☑ No. Go to Part 6.			
☐ Yes. Go to line 38.			
			Current value of the portion you own?  Do not deduct secured claims or exemptions.
38. Accounts receivable or commissions yo	ou already earned		
☑ No			٦
☐ Yes. Describe			\$
39. Office equipment, furnishings, and supp	 plies		].
Examples: Business-related computers, software	-	achines, rugs, telephones, desks, chairs, electronic devices	
☑ No			7
☐ Yes. Describe			\$

Debtor 1

Davina

Middle Name Last

Calavano Last Name

Case number	(if known)

40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade	
<ul><li>✓ No</li><li>✓ Yes. Describe</li></ul>	\$
	5
41. Inventory	
☑ No ☐ Yes. Describe	\$
Tes. Describe	φ
42. Interests in partnerships or joint ventures	
☑ No	
Yes. Describe Name of entity: % of ownership:	
	\$ \$
	\$
40 Constanting lights are allies as althous agree the first	
43. Customer lists, mailing lists, or other compilations  ☑ No	
Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?	
☐ No ☐ Yes. Describe	7
Tes. Describe	\$
44. Any business-related property you did not already list	
Yes. Give specific	¢
information	\$ ¢
	\$
	\$
	\$
	\$
45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here	\$0.00
Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In If you own or have an interest in farmland, list it in Part 1.	l <b>.</b>
46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?	
<ul><li>✓ No. Go to Part 7.</li><li>✓ Yes. Go to line 47.</li></ul>	
	Current value of the portion you own?  Do not deduct secured claims or exemptions.
47. Farm animals  Examples: Livestock, poultry, farm-raised fish	
□ No	
☐ Yes	7
	\$

Doc 1

Debtor 1

Davina First Name

Calavano Last Name Middle Name

48. Crops—either growing or harvested		
☐ No ☐ Yes. Give specific information		\$
49. Farm and fishing equipment, implements, machinery, fixture	es, and tools of trade	
☐ Yes		\$
50. Farm and fishing supplies, chemicals, and feed  No		
☐ Yes		\$
51. Any farm- and commercial fishing-related property you did	not already list	
Yes. Give specific information		\$
52. Add the dollar value of all of your entries from Part 6, include for Part 6. Write that number here		\$0.00
Part 7: Describe All Property You Own or Have	an Interest in That You Did Not List Above	
53. Do you have other property of any kind you did not already Examples: Season tickets, country club membership	list?	
✓ No  ✓ Yes. Give specific		\$
information		\$ \$
		\$ 0.00
54. Add the dollar value of all of your entries from Part 7. Write	that number here	\$
Part 8: List the Totals of Each Part of this Form	n	
55. Part 1: Total real estate, line 2		\$15,000.00
56. Part 2: Total vehicles, line 5	\$42,952.00	
57. Part 3: Total personal and household items, line 15	\$5,000.00	
58. Part 4: Total financial assets, line 36	\$1,246.46	
59. Part 5: Total business-related property, line 45	\$	
60. Part 6: Total farm- and fishing-related property, line 52	\$0.00	
61. Part 7: Total other property not listed, line 54	+\$	
62. <b>Total personal property.</b> Add lines 56 through 61	. \$ 49,198.46 Copy personal property total →	<b>+</b> \$49,198.46
63. <b>Total of all property on Schedule A/B.</b> Add line 55 + line 62		\$64,198.46

Fill in this information to identify your case:					
Debtor 1	Davina		Calavano		
Dobtoi i	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: Eastern District of California					
Case number (If known)					

☐ Check if this is an amended filing

### Official Form 106C

### Schedule C: The Property You Claim as Exempt

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

P	art 1: Identii	fy the Property You Claim	as Exempt		
	<ul><li>✓ You are clai</li><li>✓ You are clai</li></ul>	cemptions are you claiming? ming state and federal nonbanl ming federal exemptions. 11 U  ty you list on Schedule A/B th	cruptcy exemptions. 11 .S.C. § 522(b)(2)		
		on of the property and line on that lists this property	Current value of the portion you own  Copy the value from Schedule A/B	Amount of the exemption you claim  Check only one box for each exemption.	Specific laws that allow exemption
	Brief description: Line from Schedule A/B:	Disney Vacation Timeshare  1.1	\$15,000.00	■ \$ _15,000.00 ■ 100% of fair market value, up to any applicable statutory limit	C.C.P.§ 703.140(b)(5)
	Brief description: Line from Schedule A/B:	2018 Jeep Cherokee Latitude Sport Utility 4D 3.1	\$ 10,902.00	<ul> <li>  \$10,902.00 </li> <li>  100% of fair market value, up to any applicable statutory limit </li> </ul>	C.C.P.§ 703.140(b)(5)
	Brief description: Line from Schedule A/B:	2018 Husqvarna FC 250 Motorcycle	\$4,115.00	■ \$4,115.00 □ 100% of fair market value, up to any applicable statutory limit	C.C.P.§ 703.140(b)(2)
3.	(Subject to adju	·	years after that for case	s filed on or after the date of adjustment.  1,215 days before you filed this case?	)

Case 21-20174 Doc 1

Debtor 1

Davina First Name

Calavano

Last Name

Case number (if known)\_\_

Part 2:

#### **Additional Page**

Middle Name

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exempt	
		Copy the value from Schedule A/B	Check only one box for each exemption		
Brief description:	Household Goods	\$2,000.00	<b>∠</b> \$ 2,000.00	C.C.P.§ 703.140(b)(3)	
Line from Schedule A/B:	6		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	Electronics	\$1,000.00	<b>☑</b> \$1,000.00 <b>□</b> 100% of fair market value, up to	C.C.P.§ 703.140(b)(3)	
Line from Schedule A/B:	7		any applicable statutory limit		
Brief description:	Books and Pictures	\$500.00	<b>☑</b> \$500.00 <b>□</b> 100% of fair market value, up to	C.C.P.§ 703.140(b)(3)	
Line from Schedule A/B:	8		any applicable statutory limit		
Brief description:	Sports and Hobby Equipment	\$400.00	<b>5</b> 400.00	C.C.P.§ 703.140(b)(3)	
Line from Schedule A/B:	9		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	Wearing Appael	\$300.00	<b>☑</b> \$300.00 <b>□</b> 100% of fair market value, up to	C.C.P.§ 703.140(b)(3)	
Line from Schedule A/B:	11		any applicable statutory limit		
Brief description:	Jewelry	\$800.00	<b>5</b> \$800.00	C.C.P.§ 703.140(b)(4)	
Line from Schedule A/B:	12		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	Cash on Hand	\$10.00	\$10.00	C.C.P.§ 703.140(b)(5)	
Line from Schedule A/B:	16		■ 100% of fair market value, up to any applicable statutory limit		
Brief description:	Wells Fargo Checking Account6639	\$322.63	<b>⊌</b> \$322.63	C.C.P.§ 703.140(b)(5)	
Line from Schedule A/B:	17.1		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	CA EDD Card1661	\$0.00	<b>5</b> \$0.00	C.C.P.§ 703.140(b)(5)	
Line from Schedule A/B:	17.5		☐ 100% of fair market value, up to any applicable statutory limit		
Brief	E-Trade Stock Account3531	\$ 905.90	<b>⊌</b> \$905.90	C.C.P.§ 703.140(b)(5)	
description: Line from Schedule A/B:	18		100% of fair market value, up to any applicable statutory limit		
Brief description:	Davina Calavano (Sole Proprietorship)	\$0.00	<b>5</b> 0.00	C.C.P.§ 703.140(b)(5)	
Line from Schedule A/B:	19		☐ 100% of fair market value, up to any applicable statutory limit		
Brief description:	E-Trade Roth IRA9302	\$7.93	<b>5</b> \$ 7.93	C.C.P.§ 703.140(b)(10)(E)	
Line from Schedule A/B:	21		☐ 100% of fair market value, up to any applicable statutory limit		

Fill in this information to identify your case:					
Debtor 1 Davina Calavano					
	First Name	Middle Name	Last Name		
Debtor 2					
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Bankruptcy Court for the: Eastern District of California					
Case number (If known)					

# ☐ Check if this is an amended filing

### Official Form 106D

### Schedule D: Creditors Who Have Claims Secured by Property

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

- 1. Do any creditors have claims secured by your property?
  - ☐ No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below.

Part 1: List All Secured Claims				
for each claim. If more than one creditor h	nore than one secured claim, list the creditor separately as a particular claim, list the other creditors in Part 2. habetical order according to the creditor's name.	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
Disney Vacation	Describe the property that secures the claim:	\$14,715.36	\$15,000.00	\$0.00
Creditor's Name Development, Inc. Number Street	Disney Vacation Timeshare			
1390 Celebration Blvd.	As of the date you file, the claim is: Check all that apply.	_		
Celebration FL 34747 City State ZIP Code	☐ Contingent ☐ Unliquidated ☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim relates to a	<ul> <li>An agreement you made (such as mortgage or secured car loan)</li> <li>Statutory lien (such as tax lien, mechanic's lien)</li> <li>Judgment lien from a lawsuit</li> <li>Other (including a right to offset)</li> </ul>	-		
community debt  Date debt was incurred 03/28/2018	Last 4 digits of account number 1 0 0 0			
2.2 Capital One Auto Finance	Describe the property that secures the claim:	\$15,183.53	\$10,902.00	\$ 4,281.53
Creditor's Name P.O. Box 259407  Number Street	2018 Jeep Cherokee Latitude Sport Utility 4D As of the date you file, the claim is: Check all that apply.			
Plano TX 75025	☐ Contingent ☐ Unliquidated			
City State ZIP Code	☐ Disputed			
Who owes the debt? Check one.	Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim relates to a community debt Date debt was incurred 05/21/2019	<ul> <li>✓ An agreement you made (such as mortgage or secured car loan)</li> <li>✓ Statutory lien (such as tax lien, mechanic's lien)</li> <li>✓ Judgment lien from a lawsuit</li> <li>✓ Other (including a right to offset)</li> </ul> Last 4 digits of account number _ 8 _ 1 _ 2 _ 7	-		
	Column A on this page. Write that number here:	\$29,898.89		
- I and and a control in	The since inclined inclined		ļ	

Debtor 1

Davina Calavano
First Name Middle Name Last Name

Case number (if known) 17-26131-D-13G

Additional Page Part 1: After listing any entries on this p by 2.4, and so forth.	age, number them beginning with 2.3, followed	Column A  Amount of claim  Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
2.3 FreedomRoad Financial	Describe the property that secures the claim:	\$3,975.00	\$4,115.00	\$0.00
Creditor's Name  1515 West 22nd Street, Suite #_ Number Street	2018 Husqvarna FC 250 Motorcycle			
Oakland CA 94607 City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed			
Who owes the debt? Check one.   ☐ Debtor 1 only  ☐ Debtor 2 only  ☐ Debtor 1 and Debtor 2 only  ☐ At least one of the debtors and another  ☐ Check if this claim relates to a community debt  Date debt was incurred 03/07/2018	Nature of lien. Check all that apply.  ✓ An agreement you made (such as mortgage or secured car loan)  ✓ Statutory lien (such as tax lien, mechanic's lien)  ✓ Judgment lien from a lawsuit  ✓ Other (including a right to offset)  Last 4 digits of account number _0 _1 _5 _7			
Creditor's Name	Describe the property that secures the claim:	\$	\$	\$
Number Street  City State ZIP Code  Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan) Statutory lien (such as tax lien, mechanic's lien) Judgment lien from a lawsuit Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
Creditor's Name  Number Street	Describe the property that secures the claim:	\$	\$	\$
City State ZIP Code	As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed	1		
Who owes the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another  Check if this claim relates to a community debt	Nature of lien. Check all that apply.  An agreement you made (such as mortgage or secured car loan)  Statutory lien (such as tax lien, mechanic's lien)  Judgment lien from a lawsuit  Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number		1	
	in Column A on this page. Write that number here:	Ψ		
If this is the last page of your form,	add the dollar value totals from all pages.	\$ 33,873.89		

Debtor 1

Davina
First Name

Middle Name

Calavano

Last Name

Case number	(if known)			
Case Hullibel	(II KIIOWII)			

Darf 2	List Others to Be Notified for a Dobt That You Already	Lictor
rart 2:	List Others to Be Notified for a Debt That You Already	Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

be	notified for any del	ots in Part 1, do not fill out or sub	omit this page.	
2.1	Disney Vacati	on Club Dues		On which line in Part 1 did you enter the creditor? 2.1
	Name 28397 Networ	k Place		Last 4 digits of account number 1 0 0 0
	Number Street			-
	Chicago	IL	60673	-
	City	State	ZIP Code	
2.2		reedom Road		On which line in Part 1 did you enter the creditor? 2.3
	Name 10509 Profess	sional Circle, Suite #202		Last 4 digits of account number <u>0 1 5 7</u>
	Number Street			-
	Reno	NV	89521	-
	City	State	ZIP Code	-
2.3				On which line in Part 1 did you enter the creditor?
	Name			Last 4 digits of account number
	Number Street			-
	City	State	ZIP Code	- -
				On which line in Part 1 did you enter the creditor?
	Name			Last 4 digits of account number
	Number Street			-
	City	State	ZIP Code	-
				On which line in Part 1 did you enter the creditor?
	Name			Last 4 digits of account number
	Number Street			-
				-
	City	State	ZIP Code	
				On which line in Part 1 did you enter the creditor?
	Name			Last 4 digits of account number
	Number Street			-
				-
	City	State	ZIP Code	

Fill in this in	Fill in this information to identify your case:					
Debtor 1	Davina	Calavano				
_	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the: Ea	stern District of California	a			
Case number (If known)						

## ☐ Check if this is an amended filing

### Official Form 106E/F

### Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on Schedule A/B: Property (Official Form 106A/B) and on Schedule G: Executory Contracts and Unexpired Leases (Official Form 106G). Do not include any creditors with partially secured claims that are listed in Schedule D: Creditors Who Have Claims Secured by Property. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

art 1: List All of Your PRIORITY Unsecure	ed Claims			
Do any creditors have priority unsecured claims	s against you?			
No. Go to Part 2.				
☐ Yes.				
List all of your priority unsecured claims. If a creeach claim listed, identify what type of claim it is. If nonpriority amounts. As much as possible, list the company to	editor has more than one priority unsecured claim, list the a claim has both priority and nonpriority amounts, list the claims in alphabetical order according to the creditor's neart 1. If more than one creditor holds a particular claim particular form in the instruction booklet.	at claim here a ame. If you hav	nd show both re more than t	priority and wo priority
(I of all explanation of each type of daint, see the ii	istructions for this form in the instruction booklet.)	Total claim	Priority amount	Nonprior amount
Priority Creditor's Name	Last 4 digits of account number	\$	\$	\$
Thomy ordinors realing	When was the debt incurred?			
Number Street	When was the dest mounted.			
	As of the date you file, the claim is: Check all that apply	,		
	_	•		
City State ZIP Code	☐ Contingent☐ Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	□ Disputed			
Debtor 2 only	Type of PRIORITY unsecured claim:			
☐ Debtor 1 and Debtor 2 only	☐ Domestic support obligations			
At least one of the debtors and another	☐ Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	Claims for death or personal injury while you were intoxicated			
Is the claim subject to offset?  ☐ No	Other. Specify			
☐ No ☐ Yes	- Cutof. Opcony	-		
	Last 4 digits of account number	¢	¢	¢
Priority Creditor's Name		Ψ	Ψ	Ψ
	When was the debt incurred?			
Number Street	As of the date you file, the claim is: Check all that apply	<i>t</i> .		
	☐ Contingent			
City State ZIP Code	☐ Unliquidated			
Who incurred the debt? Check one.	☐ Disputed			
Debtor 1 only	T ( DDIODITY			
Debtor 2 only	Type of PRIORITY unsecured claim:			
Debtor 1 and Debtor 2 only	Domestic support obligations			
At least one of the debtors and another	Taxes and certain other debts you owe the government			
☐ Check if this claim is for a community debt	<ul> <li>Claims for death or personal injury while you were intoxicated</li> </ul>			
Is the claim subject to offset? ☐ No	Other. Specify	-		
Yes				

Middle Name

Part 2: List All of Your NONPRIORITY Unsecured Claims

ΗĽ	List Air or Tour North Rion		cource oraniis		
3.	Do any creditors have nonpriority uns ☐ No. You have nothing to report in this ☑ Yes				
	nonpriority unsecured claim, list the cred	itor separa itor holds	ately for each clair	order of the creditor who holds each claim. If a creditor han in For each claim listed, identify what type of claim it is. Do no list the other creditors in Part 3.If you have more than three no	t list claims already
					Total claim
4.1	Department of Education / New	iont		0 0 1 0	
	Department of Education / Nav			Last 4 digits of account number 2 0 1 6	\$ 62,377.00
				When was the debt incurred? 04/1997	Ψ
	123 Justison Street, 3rd Floor Number Street			-	
	Wilmington	DE	19801		
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.	
	S.,	Otato	2 0000	_	
	Who incurred the debt? Check one.			☐ Contingent	
	_			Unliquidated	
	Debtor 1 only Debtor 2 only			Disputed	
	Debtor 2 only  Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another				
	_			<ul><li>✓ Student loans</li><li>✓ Obligations arising out of a separation agreement or divorce</li></ul>	
	☐ Check if this claim is for a commun	ity debt		that you did not report as priority claims	
	Is the claim subject to offset?			Debts to pension or profit-sharing plans, and other similar debt	s
	☑ No			Other. Specify	
	☐ Yes				
4.2	Landing Chile Comparation			Last 4 digits of account number 6 0 0 9	s 12,682.45
7.2	Lending Club Corporation  Nonpriority Creditor's Name			When was the debt incurred? 10/2019	Ψ
	595 Market Street, Suite #200			THE WAS the dest mounted.	
	Number Street			-	
	San Francisco	CA	94105	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated	
	Debtor 1 only			Disputed	
	Debtor 2 only			•	
	Debtor 1 and Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another			☐ Student loans	
				Obligations arising out of a separation agreement or divorce	
	☐ Check if this claim is for a commur	ity debt		that you did not report as priority claims	
	Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debt	S
	☑ No			✓ Other. Specify Personal Loan	
	☐ Yes				
4.3	NC Financial			Last 4 digits of account number 2 9 6 8	s 10,753.00
	Nonpriority Creditor's Name			When was the debt incurred? 10/2019	\$
	175 West Jackson Blvd., Suite	#1000		-	
	Number Street Chicago	IL	60604		
	City	State	ZIP Code	As of the date you file, the claim is: Check all that apply.	
		-		☐ Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated	
	Debtor 1 only			Disputed	
	Debtor 2 only				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another			Type of NONPRIORITY unsecured claim:	
	At least one of the deptors and another			☐ Student loans	
	☐ Check if this claim is for a commun	ity debt		Obligations arising out of a separation agreement or divorce	
	Is the claim subject to offset?			that you did not report as priority claims	
	☑ No			☐ Debts to pension or profit-sharing plans, and other similar debt☐ Other. Specify Personal Loan	S
	☐ Yes			- Surer. Opeony 1 61301101 LOCAL	

Case number (if known)\_

Part 2:

After I	isting any entries on this page	e, number the	em beginning wit	th 4.4, followed by 4.5, and so forth.	Total claim
	Capital One Bank (USA), N	N.A.		Last 4 digits of account number 1 7 9 2	<sub>\$655.3</sub>
	onpriority Creditor's Name P.O. Box 31293			When was the debt incurred? 10/2019	
	umber Street Salt Lake City	UT	84131	As of the date you file, the claim is: Check all that apply.	
Ci	ity  Who incurred the debt? Check one	State	ZIP Code	Contingent Unliquidated	
_	Z Debtor 1 only	•		☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only			Type of <b>NONPRIORITY</b> unsecured claim:	
	At least one of the debtors and and	other		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
	Check if this claim is for a con	nmunity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
¥	s the claim subject to offset?  No Yes			Other. Specify Credit Card	
4.5				7 4 0 0	
	Capital One / Walmart onpriority Creditor's Name			Last 4 digits of account number 7 4 9 8	\$ 364.8
	P.O. Box 31293			When was the debt incurred? 12/2017	
	umber Street Salt Lake City	UT	84131	As of the date you file, the claim is: Check all that apply.	
	ity	State	ZIP Code	Contingent	
	Who incurred the debt? Check one Debtor 1 only	<b>.</b>		☐ Unliquidated ☐ Disputed	
	Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and and	other		Type of <b>NONPRIORITY</b> unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a con	nmunity debt		you did not report as priority claims	
	s the claim subject to offset?	•		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Charge Card	
	☑ No ☑ Yes				
4.6	Comenity Bank / Victoria's	Secret		Last 4 digits of account number 3 3 2 5	\$224.0
No	onpriority Creditor's Name			When was the debt incurred? 04/2018	
	P.O. Box 182789 umber Street			As of the date you file, the claim is: Check all that apply.	
	Columbus	OH State	43218 ZIP Code	Contingent	
			Zii Gode	Unliquidated	
_	Who incurred the debt? Check one	).		☐ Disputed	
	☑ Debtor 1 only ☐ Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and and	other		Obligations arising out of a separation agreement or divorce that	
	Check if this claim is for a con	nmunity debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
Ł	s the claim subject to offset? No Yes			Other. Specify Charge Card	

Middle Name

Case number (if known)\_

#### Part 2:

Nonprinting Christitor's Name   P.O. Box 98872   Number   Street   Las Vegas   NV   89193   City   State   ZiP Code   Debtor 1 only   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 onlo Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 2 only   Debtor 2 only   Debtor 3 only   Debtor 3 only   Debtor 4 only   Debtor	Afte	er listing any entries on this page, nu	ımber ther	n beginning with 4.	4, followed by 4.5, and so forth.		Total claim
P. D. Box 98872   When was the debt incurred?   Q8/2018   Q8/201	4.7				Last 4 digits of account number	r <u>4 1 8 6</u>	\$949.00
Las Vegas   NV   89193   Contemporary   Contemporar		P.O. Box 98872			When was the debt incurred?	08/2018	
Who incurred the debt? Check one.    Debtor 1 and Debtor 2 only			NV	89193	As of the date you file, the claim	n is: Check all that apply.	
Debtor 1 and Debtor 2 only   At least one of the debtors and another   Check if this claim is for a community debt is the claim subject to offset?   Debtor 1 only   Debtor		City  Who incurred the debt? Check one.			☐ Unliquidated		
At least one of the deblors and another   Check if this claim is for a community debt is the claim subject to offset?   I No					Type of <b>NONPRIORITY</b> unsecu	red claim:	
Check if this claim is for a community debt is the claim subject to offset?   Quality to person or profits-haring plans, and other similar debts is the claim subject to offset?   Quality to person or profits-haring plans, and other similar debts   Quality to person or profits to person or profits-haring plans, and other similar debts   Quality to person or profits to person plans, and other similar debts   Quality to person or profits plans plans, and other similar debts   Quality to person or profits plans plans, and other similar debts   Quality to person or profits plans plans, and other similar debts   Quality to person or profits plans plans   Quality to person or profits plans   Quality to person or person or profits plans   Quality to person or person or profits plans   Quality to person or person or person   Quality to person or person or person   Quality to person or person   Quality to person			-			aration agreement or divorce that	
Last 4 digits of account number 2 3 7 3 \$ 957.00  As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Unliq		☐ Check if this claim is for a commu	nity debt		you did not report as priority clai	ims	
Credit One Bank  Nonprority Creditar's Name P.O. Box 98872  Number Street Las Vegas NV 89193 City State Zip Code  Who incurred the debt? Check one.  Debtor 1 and Debtor 2 only Debtor 1 and Debtor 3 only Debtor 1 sharing subject to offset?  Who is the claim subject to offset?  Who incurred the debt? Check one.  Debtor 3 and other similar debts  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Last 4 digits of account number 2 3 7 3 s 9557.00  When was the debt incurred?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Last 4 digits of account number 2 3 7 3 s 9557.00  As of the date you file, the claim is: Check all that apply.  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims  When was the debt incurred?  Myounder of a community debt as priority claims Debts to pension or profit-sharing plans, and other similar debts  Sioux Falls Sioux Fal		☑ No					
Nonpriery Creditor's Name P.O. Box 98872 Number Street Las Vegas NV 89193 City State ZIP Code Who incurred the debt? Check one.    Debtor 1 only   Debtor 2 only   Debtor 1 and Debtor 2 only   Debtor 4 debtors and another   Debtor 2 only   Debtor 5 only   Debtor 6 only   Debtor 5 only   Debtor 6 only   Debtor 6 only   Debtor 7 only   Debtor 7 only   Debtor 8 only   Debtor 9 only   Debtor 1 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 1 only   Debtor 2 only   Debtor 2 only   Debtor 1 only   Debtor 1 only   Debtor 2 only	4.8	Credit One Bank			Last 4 digits of account number	r <u>2 3 7 3</u>	\$ 957.00
P.O. Box 98872   Number   Street		Nonpriority Creditor's Name			When was the debt incurred?	07/2017	
Las Vegas NV 89193 City State ZiP Code City State ZiP Code Who incurred the debt? Check one.  ☑ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Check if this claim is for a community debt Is the claim subject to offset? ☑ No ☐ Yes  4.9  First Savings Credit Card Nonpriority Creditors Name 1500 South Highline Ave. Number Street Sioux Falls SD 57110 City State ZiP Code Who incurred the debt? Check one. ☑ Debtor 1 and Debtor 2 only ☐ Debtor 2 only ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 only ☐ Debtor 1 only ☐ Debtor 1 and Debtor 2 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Debtor 3 only Greater 3 only only 6 a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card ☐ Debts to pension or profit-sharing plans, and other similar debts ☑ Other. Specify Credit Card ☐ Contingent ☐ Uniliquidated ☐ Disputed ☐ Disputed ☐ Debtor 2 only ☐ Debtor 3 only ☐ Debtor 3 only ☐ Debtor 3 only ☐ Debtor 3 only ☐ Debtor 4 only ☐ Debtor 4 only ☐ Debtor 5 only ☐ Debtor 5 only ☐ Debtor 6 only ☐ Debtor 7 only ☐ Debtor 8 only ☐ Debtor 9 only ☐ Debtor					when was the debt incurred?		
Who incurred the debt? Check one.  ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No ☐ Yes  ☐ Ves ☐ Pirst Savings Credit Card ☐ Nonpriority Creditor's Name ☐ Stouch Flighline Ave. ☐ Number Street ☐ Sioux Falls ☐ South Highline Ave. ☐ Stouch Loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Credit Card ☐ Vene was the debt incurred? ☐ 1 8 6 ☐ \$1,275.00 ☐ As of the date you file, the claim is: Check all that apply. ☐ Contingent ☐ Unliquidated ☐ Disputed ☐ Disputed ☐ Disputed ☐ Other. Specify Credit Card ☐ Other Specify Credit Card			NV	89193	As of the date you file, the claim	n is: Check all that apply.	
Who incurred the debt? Check one.    Disputed		City	State	ZIP Code	<u> </u>		
First Savings Credit Card  Nonpriority Creditor's Name  1500 South Highline Ave.  Number Street Sioux Falls SD 57110 City State ZIP Code  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 2 and Debtor 2 only At least one of the debtors and another  Check if this claim is for a community debt Is the claim subject to offset?  First Savings Credit Card  When was the debt incurred?  O1/2018  When was the debt incurred? O1/2018  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts  Other. Specify Credit Card		Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a commuls the claim subject to offset?			□ Disputed  Type of NONPRIORITY unsecu □ Student loans □ Obligations arising out of a sepa you did not report as priority clai □ Debts to pension or profit-sharin	aration agreement or divorce that ims ng plans, and other similar debts	
Mhen was the debt incurred? 01/2018    Number   Street	4.9	•			Last 4 digits of account number	r <u>0 1 8 6</u>	\$ <u>1,275.00</u>
Sioux Falls  SD 57110  City State ZIP Code  Contingent Unliquidated Unliquidated Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  As of the date you file, the claim is: Check all that apply.  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim:  Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card		1500 South Highline Ave.			When was the debt incurred?	01/2018	
City State ZIP Code Unliquidated  Who incurred the debt? Check one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this claim is for a community debt Is the claim subject to offset?  Contingent Unliquidated Disputed  Type of NONPRIORITY unsecured claim: Student loans Obligations arising out of a separation agreement or divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Other. Specify Credit Card			SD	57110	As of the date you file, the claim	n is: Check all that apply.	
Who incurred the debt? Check one.  ☐ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this claim is for a community debt Is the claim subject to offset? ☐ No							
□ Debtor 1 and Debtor 2 only □ At least one of the debtors and another □ Check if this claim is for a community debt □ Is the claim subject to offset? □ No □ Student loans □ Obligations arising out of a separation agreement or divorce that you did not report as priority claims □ Debts to pension or profit-sharing plans, and other similar debts □ Other. Specify Credit Card		_					
□ At least one of the debtors and another □ Check if this claim is for a community debt □ the claim subject to offset? □ No					Type of NONPRIORITY unsecu	red claim:	
☐ Check if this claim is for a community debt  Is the claim subject to offset?  ☐ Check if this claim is for a community debt  ☐ Debts to pension or profit-sharing plans, and other similar debts  ☐ Other. Specify Credit Card		<del>-</del>	-				
☐ Debts to pension or profit-sharing plans, and other similar debts  Is the claim subject to offset?  ☐ Other. Specify Credit Card ☐ No					<ul> <li>Obligations arising out of a sepa you did not report as priority clai</li> </ul>	aration agreement or divorce that ims	
		Is the claim subject to offset?  ☑ No	inity debt		Debts to pension or profit-sharing	ng plans, and other similar debts	

Calavano

Case number (if known)\_

#### Part 2:

er listing any entries on this p	page, number the	em beginning wit	th 4.4, followed by 4.5, and so forth.	Total clai
Nordstrom			Last 4 digits of account number 3 9 3 2	<sub>\$_1,967.</sub>
Nonpriority Creditor's Name 13531 East Caley Ave.			When was the debt incurred? 08/2018	
Number Street Engelwood	CO	80111	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent Unliquidated	
Who incurred the debt? Check Debtor 1 only	cone.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and			☐ Student loans	
			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
☐ Check if this claim is for a	-		☐ Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			✓ Other. Specify Charge Card	
Yes				
TD Bank USA / Target	Cradit		Last 4 digits of account number 1 9 5 1	\$ 2,862
Nonpriority Creditor's Name	orealt		10/0017	¥
P.O. Box 1470			When was the debt incurred? 10/2017	
Number Street Minneapolis	NM	55440	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check	cone.		☐ Unliquidated ☐ Disputed	
Debtor 1 only			□ Disputed	
Debtor 2 only			Type of <b>NONPRIORITY</b> unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and	d another		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
☐ Check if this claim is for a	community debt		you did not report as priority claims	
Is the claim subject to offset?	-		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Charge Card	
No			Other. Specify Orlarge Gard	
Yes				
   Western Dental Service	s, Inc.		Last 4 digits of account number 2 9 1 0	\$_3,814
Nonpriority Creditor's Name 530 South Main Street			When was the debt incurred? 11/2020	
Number Street Orange	CA	92868	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check	cone		Unliquidated	
Debtor 1 only			☐ Disputed	
Debtor 2 only			Type of <b>NONPRIORITY</b> unsecured claim:	
☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and	d another		Student loans	
			<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
Check if this claim is for a	-		Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			✓ Other. Specify Credit Card	
☑ No ☑ Yes				

Calavano

Case number (if known)

Part 2:

Afte	r listing any entries on this page, n	umber the	m beginning with 4	4.4, followed by 4.5, and so forth.	Total claim
4.13	Pacific Coast Iron, LLC Adam Murray Nonpriority Creditor's Name			Last 4 digits of account number 8 5 9 2  When was the debt incurred 2 04/2019	\$ 30,104.75
	520 Truck Street			When was the debt incurred? 04/2019	
	Number Street Placerville	CA	95667	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and anothe	r		Student loans	
				<ul> <li>Obligations arising out of a separation agreement or divorce that you did not report as priority claims</li> </ul>	
	Check if this claim is for a commu	unity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			☑ Other. Specify Civil Lawsuit	
	Yes				
4.14	AAA Insurance			Last 4 digits of account number 9 7 3 1	\$ 716.00
	Nonpriority Creditor's Name			When was the debt incurred? Unknown	
	P.O. Box 24502			When was the debt incurred? UNKNOWN	
	Number Street Oakland	CA	94623	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	☐ Contingent	
	Who incurred the debt? Check one.			Unliquidated	
	Debtor 1 only			☐ Disputed	
	Debtor 2 only			Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only			☐ Student loans	
	At least one of the debtors and anothe			Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	☐ Check if this claim is for a commu	unity debt		Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?			✓ Other. Specify Auto Insurnace	
	☑ No ☐ Yes				
4.15		-1'			\$ 1,000.00
4.13	US Small Business Administr Legal Division District Office	ation		Last 4 digits of account number 8 2 0 5	\$_1,000.00
	Nonpriority Creditor's Name			When was the debt incurred? 08/2020	
	6501 Sylvan Road, Suite #10	0			
	Citrus Heights	CA	95610	As of the date you file, the claim is: Check all that apply.	
	City	State	ZIP Code	Contingent	
	Who incurred the debt? Check one.			☐ Unliquidated ☐ Disputed	
	Debtor 1 only				
	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only			Type of <b>NONPRIORITY</b> unsecured claim:	
	At least one of the debtors and anothe	r		<ul><li>Student loans</li><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
	☐ Check if this claim is for a commu	ınity deht		you did not report as priority claims	
	Is the claim subject to offset?	anny uebt		☐ Debts to pension or profit-sharing plans, and other similar debts ☐ Other. Specify Economic Injury Disaster Loan	
	✓ No  Yes			Tother. Specify <u>LCOHOTHIC ITIJUTY DISASTER L</u> OAN	
					_

Doc 1

Case number (if known)\_

Part 2:

Sacramento Municipal L	Jtility District		Last 4 digits of account number 8 6 9 5	\$_1,800.0
Nonpriority Creditor's Name P.O. Box 15830			When was the debt incurred? 01/2021	
Number Street Sacramento	CA	95852	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check	ono		Unliquidated	
Debtor 1 only	one.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and	another		Obligations arising out of a separation agreement or divorce that	
Check if this claim is for a	community debt		you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar debts	
Is the claim subject to offset?			Other. Specify Utility Bill	
Yes				
Pacific Gas & Electric			Last 4 digits of account number 7 3 5 3	\$ <u>235.6</u>
Nonpriority Creditor's Name			When was the debt incurred? 01/2021	
P.O. Box 8329			When was the dept incurred?	
Number Street Stockton	CA	95208	As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Mha inauwad tha daht2 Chask			Unliquidated	
Who incurred the debt? Check	one.		☐ Disputed	
<ul><li>✓ Debtor 1 only</li><li>✓ Debtor 2 only</li></ul>			Type of <b>NONPRIORITY</b> unsecured claim:	
Debtor 1 and Debtor 2 only			Student loans	
At least one of the debtors and	d another		<ul><li>Obligations arising out of a separation agreement or divorce that</li></ul>	
☐ Check if this claim is for a	community debt		you did not report as priority claims	
Is the claim subject to offset?	<b>,</b>		Debts to pension or profit-sharing plans, and other similar debts	
No			☑ Other. Specify <u>Utility Bill</u>	
Yes				
			Last 4 digits of account number	\$
Nonpriority Creditor's Name			When was the debt incurred?	
Number Street			As of the date you file, the claim is: Check all that apply.	
City	State	ZIP Code	Contingent	
Who incurred the debt? Check	one		Unliquidated	
Debtor 1 only	0.10.		☐ Disputed	
Debtor 2 only			Type of NONPRIORITY unsecured claim:	
Debtor 1 and Debtor 2 only			☐ Student loans	
At least one of the debtors and	l another		Obligations arising out of a separation agreement or divorce that	
☐ Check if this claim is for a	community debt		you did not report as priority claims	
Is the claim subject to offset?			☐ Debts to pension or profit-sharing plans, and other similar debts☐ Other. Specify	
□ No				

Middle Name

Jse this page only if you hav	e others to be	notified about	your bankruptcy, for a debt that you already listed in Parts 1 or 2. For
example, if a collection agen 2, then list the collection age	cy is trying to ency here. Simil u do not have a	collect from yo larly, if you have	u for a debt you owe to someone else, list the original creditor in Parts 1 or e more than one creditor for any of the debts that you listed in Parts 1 or 2, list the ons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Bankruptcy Section			On which entry in Part 1 or Part 2 did you list the original creditor?
50 United Nations Plaz	a		Line <u>4.12</u> of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Clair
Mail Box 1200		0.44.00	Last 4 digits of account number 2 9 1 0
San Francisco City	CA State	94102 ZIP Code	
Department of Education	on / Navient		On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. Box 9635			Line 4.1 of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			☐ Part 2: Creditors with Nonpriority Unsecured Claims
Wilkes Barre	 PA	18773	
City	State	ZIP Code	Last 4 digits of account number 2 0 1 6
Department of Educati	on / Navient		On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. Box 9500			Line 4.1 of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			☐ Part 2: Creditors with Nonpriority Unsecured Claims
Wilkes Barre	PA	18773	
City	State	ZIP Code	Last 4 digits of account number 2 0 1 6
First Savings Bank			On which entry in Part 1 or Part 2 did you list the original creditor?
500 East 60th Street N	lorth		Line <u>4.9</u> of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
C:			Claims
Sioux Falls City	SD State	57104 ZIP Code	Last 4 digits of account number $\underline{0}  \underline{1}  \underline{8}  \underline{6}$
Net Credit			On which entry in Part 1 or Part 2 did you list the original creditor?
200 West Jackson Blvd	d., Suite #24	00	Line <u>4.3</u> of ( <i>Check one</i> ): □ Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
Chiango		60606	
Chicago City	IL State	60606 ZIP Code	Last 4 digits of account number 2 9 6 8
Oliphant Financial			On which entry in Part 1 or Part 2 did you list the original creditor?
1800 Second Street, S	uite #603		Line 4.2 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street	uno 11000		Part 2: Creditors with Nonpriority Unsecured
			Claims
Sarasota City	FL State	34236 ZIP Code	Last 4 digits of account number <u>6</u> <u>0</u> <u>0</u> <u>9</u>
Pacific Coast, LLC			On which entry in Part 1 or Part 2 did you list the original creditor?
c/o Evers Law Group			Line <u>4.13</u> of ( <i>Check one</i> ): □ Part 1: Creditors with Priority Unsecured Claims
Number Street	#200		Part 2: Creditors with Nonpriority Unsecured
641 Fulton Ave., Suite		05005	Claims
Sacramento City	CA State	95825 ZIP Code	Last 4 digits of account number $8 5 9 2$

Case 21-20174

Middle Name

### List Others to Be Notified About a Debt That You Already Listed

then list the collection ag	ency here. Simi	larly, if you have	ou for a debt you owe to someone else, list the original creditor in Parts 1 or e more than one creditor for any of the debts that you listed in Parts 1 or 2, list the ons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.
Western Dental Servic	es, Inc.		On which entry in Part 1 or Part 2 did you list the original creditor?
P.O. Box 14228			Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street			✓ Part 2: Creditors with Nonpriority Unsecured Cla
Orange	CA	92868	Last 4 digits of account number 2 9 1 0
City	State	ZIP Code	
AAA Insurance			On which entry in Part 1 or Part 2 did you list the original creditor?
Name 3055 Oak Road			Line 4.12 of (Check one): ☐ Part 1: Creditors with Priority Unsecured Claims
Number Street			Part 2: Creditors with Nonpriority Unsecured
			Claims
Walnut Creek	CA	94597	Last 4 digits of account number 2 9 1 0
City	State	ZIP Code	Last 4 digits of account number = 0 1 0
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
			Line of (Check one): Part 1: Creditors with Priority Unsecured Claim
Number Street			Part 2: Creditors with Nonpriority Unsecured Claims
			Sidiffic
 Dity	State	ZIP Code	Last 4 digits of account number
,			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			☐ Part 2: Creditors with Nonpriority Unsecured Claims
			Ciaillis
City	State	ZIP Code	Last 4 digits of account number
Jity	Otato	Zii Code	
 Name			On which entry in Part 1 or Part 2 did you list the original creditor?
			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			☐ Part 2: Creditors with Nonpriority Unsecured
			Claims
			Last 4 digits of account number
City	State	ZIP Code	
			On which entry in Part 1 or Part 2 did you list the original creditor?
vanio			Line of (Check one):  Part 1: Creditors with Priority Unsecured Claims
Number Street			□ Part 2: Creditors with Nonpriority Unsecured
			Claims
			Last 4 digits of account number
City	State	ZIP Code	
			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			
Number Street			Line of (Check one): Part 1: Creditors with Priority Unsecured Claims
			Part 2: Creditors with Nonpriority Unsecured Claims
	State	7IP Codo	Last 4 digits of account number

Doc 1

Part 4: Add

Filed 01/20/21 Davina

Add the Amounts for Each Type of Unsecured Claim

Last Name

Middle Name

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159. Add the amounts for each type of unsecured claim.

			Total claim	
Total claims from Part 1	6a. Domestic support obligations	6a.	\$	0.00
	6b. Taxes and certain other debts you owe the government	6b.	\$	0.00
	6c. Claims for death or personal injury while you were intoxicated	6c.	\$	0.00
	6d. <b>Other.</b> Add all other priority unsecured claims. Write that amount here.	6d.	+\$	0.00
	6e. <b>Total.</b> Add lines 6a through 6d.	6e.	\$	0.00
			Total claim	
Total claims from Part 2	6f. Student loans	6f.	\$	62,377.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$	0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$	0.00
	Other. Add all other nonpriority unsecured claims.     Write that amount here.	6i.	+ \$	70,244.44

Fill in this information to identify your case:						
Debtor	Davina		Calavano			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse If filing)	First Name	Middle Name	Last Name			
United States Bankruptcy Court for the: Eastern District of California						
Case number (If known)						

☐ Check if this is an amended filing

### Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - ☐ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
  - Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

	Person or	company with wl	nom you	have the contract or lease	State what the contract or lease is for
2.1	MB Financial Services  Name  14372 Hertigatge Parkway  Number Street				36 Month Auto Lease 2018 Mercedes-Benz C-Class C 300 Sedan 4D
	Fort Wo		TX State	76177 ZIP Code	
2.2	,				
	Name				<del></del>
	Number	Street			<del></del>
	City		State	ZIP Code	<del></del>
2.3					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.5					
	Name				
	Number	Street			
	City		State	ZIP Code	

Fill in this information to identify your case:							
Debtor 1	Davina	Calavano					
	First Name	Middle Name	Last Name				
Debtor 2							
(Spouse, if filing)	First Name	Middle Name	Last Name				
United States Bankruptcy Court for the: Eastern District of California							
Case number (If known)							

☐ Check if this is an amended filing

### Official Form 106H

### **Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

case	number (if known). Answer eve	ry question.		
	Oo you have any codebtors? (If ☐ No	you are filing a joint case, do no	ot list either spouse	as a codebtor.)
	☐ Yes			
	<b>Within the last 8 years, have you</b> Arizona, California, Idaho, Louisia	* * * *	•	ry? (Community property states and territories include ashington, and Wisconsin.)
[	No. Go to line 3.			
	Yes. Did your spouse, former	spouse, or legal equivalent live	with you at the time	e?
	☐ No			
	Yes. In which community s	state or territory did you live?	California	Fill in the name and current address of that person.
	Akil Anderson			
	Name of your spouse, former spo	use, or legal equivalent		
	6812 Bender Court			
	Number Street			
	Sacramento	CA	95820	
	City	State	ZIP Code	
	Schedule E/F, or Schedule G to  Column 1: Your codebtor	23. 23. 23. 23. 23. 23. 23. 23. 23.		Column 2: The creditor to whom you owe the debt
				Check all schedules that apply:
3.1	Antonio Calavano			Schedule D, line
	Name			Schedule E/F, line
	6812 Bender Court Number Street			Schedule G, line 2.1
	Sacramento	CA	95820	Scriedule G, line Z.1
<u> </u>	City	State	ZIP Code	<del></del>
3.2				Schedule D, line
	Name			Schedule E/F, line
	Number Street			Schedule G, line
	Number Street			Schedule G, line
	City	State	ZIP Code	
3.3				Schedule D. line
	Name			,
	Number Street			Schedule E/F, line
	Number Sueet			☐ Schedule G, line
-	City	State	ZIP Code	

Fill in this information to identify your case:								
Debtor 1	Davina		Calavano					
202101 1	First Name	Middle Name	Last Name					
Debtor 2								
(Spouse, if filing)	First Name	Middle Name	Last Name					
United States E	United States Bankruptcy Court for the: Eastern District of California							
Case number (If known)								

Check	11	una	10.

- ☐ An amended filing
- A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

### Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Describe Employment

<ol> <li>Fill in your employment information.</li> </ol>		Debtor 1			Debtor 2 or non-f	iling spouse
If you have more than one job, attach a separate page with information about additional employers.	Employment status	<ul><li><b>☑</b> Employed</li><li><b>☑</b> Not employe</li></ul>	d		☐ Employed ☐ Not employed	
Include part-time, seasonal, or self-employed work.		Caregiver			-Disabled-	
Occupation may include student or homemaker, if it applies.	Occupation	<u>Odregiver</u>			Disabled	
	Employer's name	In Home Support Services (IHSS)		ervices (IHSS)	-N/A-	
	Employer's address	3700 Branch	Cente	r Road	-N/A-	
		Number Street			Number Street	
		Suite A				
		Sacramento	CA	95827	-N/A-	
		City	State	ZIP Code	City	State ZIP Code
	How long employed there	? 8 Months			N/A	

#### Part 2:

#### **Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
 Estimate and list monthly overtime pay.

4. Calculate gross income. Add line 2 + line 3.

For Debtor 1 For Debtor 2 or non-filing spouse

2. \$\\_2,938.00 \\ \\_3 \\ +\\_\\_0.00 \\ +\\_\\_0.00

4. \$\\ \\$\\_2,938.00 \\ \\$\\ \\ 0.00

Debtor 1

Davina Calavano
First Name Middle Name Last Name

Case number (if known	١		

		Fo	r Debtor 1		ebtor 2 or ling spouse
Copy line 4 here	. <b>→</b> 4.	\$	2,938.00	\$	0.00
5. List all payroll deductions:					
5a. Tax, Medicare, and Social Security deductions	5a.	\$	99.91	\$	0.00
5b. Mandatory contributions for retirement plans	5b.	Ψ \$	0.00	\$ \$	0.00
5c. Voluntary contributions for retirement plans	5c.	\$	0.00	\$	0.00
5d. Required repayments of retirement fund loans	5d.	\$	0.00	\$	0.00
5e. Insurance	5e.	\$	0.00	\$	0.00
5f. Domestic support obligations	5f.	\$	0.00	\$	0.00
		\$	0.00	\$	0.00
5g. Union dues 5h. Other deductions. Specify:	5g. 5h.	+\$	0.00	+ \$	0.00
				Ψ	
6. <b>Add the payroll deductions</b> . Add lines 5a + 5b + 5c + 5d + 5e +5f + 5g + 5	5h. 6.	\$	99.91	\$	0.00
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7.	\$	2,838.09	\$	0.00
8. List all other income regularly received:					
8a. Net income from rental property and from operating a business, profession, or farm					
Attach a statement for each property and business showing gross					
receipts, ordinary and necessary business expenses, and the total monthly net income.	8a.	\$	0.00	\$	0.00
8b. Interest and dividends	8b.	\$	0.00	\$	0.00
8c. Family support payments that you, a non-filing spouse, or a depen- regularly receive	dent				
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	8c.	\$	0.00	\$	0.00
8d. Unemployment compensation	8d.	\$	0.00	\$	954.72
8e. Social Security	8e.	\$	0.00	\$	0.00
8f. Other government assistance that you regularly receive					
Include cash assistance and the value (if known) of any non-cash assist					
that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.	I				
Specify:	_ 8f.	\$	0.00	\$	0.00
8q. Pension or retirement income	8g.	\$	0.00	\$	0.00
	_	Ψ		Ψ	
8h. Other monthly income. Specify:	_ on.	+\$	0.00	+\$	0.00
9. <b>Add all other income</b> . Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h.	9.	\$	0.00	\$	954.72
10. Calculate monthly income. Add line 7 + line 9.			2 020 00		954.72
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$	2,838.09	+ \$	954.72
11. State all other regular contributions to the expenses that you list in <i>Sch</i>	nedule .	 J.			
Include contributions from an unmarried partner, members of your household friends or relatives.			ents, your roo	ommates, a	nd other
Do not include any amounts already included in lines 2-10 or amounts that all	re not a	vailabl	e to pay expe	nses listed	in Schedule J.
Specify:					11. <del>-</del>
12. Add the amount in the last column of line 10 to the amount in line 11. The				-	me.
Write that amount on the Summary of Your Assets and Liabilities and Certain	า Statist	ical Inf	ormation, if it	applies	12.
13. Do you expect an increase or decrease within the year after you file thi	s form?	?			
Yes. Explain: Debtor no longer takes care of Rober	t San	chez	z. Income	e adiust	ted accordi
poster no longer taree ours of Hober	· Juil	J. 102		- 44140	.ca accordi

			_		
Fill in this information to	o identify your case:				
Debtor 1 Davina First Name		Calavano  Last Name	Check if this	is:	
Debtor 2			☐ An amen	ded filing	
(Spouse, if filing) First Name	Middle Name	Last Name		ment showing post	petition chapter 13
United States Bankruptcy Co	ourt for the: Eastern District of California			s as of the following	
Case number (If known)			MM / DD /	YYYY	
Official Form 10	)6J		-		
Schedule J	: Your Expenses	5			12/15
information. If more space (if known). Answer every	rrate as possible. If two married peopers is needed, attach another sheet to question.  Your Household				
1. Is this a joint case?		_			
No. Go to line 2.	live in a separate household?				
☐ No	r 2 must file Official Form 106J-2, <i>Expe</i>	enses for Separate Hous	sehold of Debtor 2.		
2. Do you have dependen	nts?	·			
Do not list Debtor 1 and Debtor 2.	Yes. Fill out this inform each dependent	nation for Debtor 1 or	s relationship to Debtor 2	Dependent's age	Does dependent live with you?
Do not state the depend names.	·	Daughter	r	8	☐ No ☑ Yes
					□ No
					☐ Yes
					☐ No☐ Yes
					☐ No
					Yes
					☐ No
					☐ Yes
3. Do your expenses incluexpenses of people of yourself and your depe	her than				
	ur Ongoing Monthly Expenses				
	as of your bankruptcy filing date un	 less vou are using this	s form as a supplem	ent in a Chapter 13 o	ase to report
	er the bankruptcy is filed. If this is a				
•	r with non-cash government assista	•		Your expe	nses
	e included it on Schedule I: Your Inc	•	•	тош схре	
any rent for the ground	vnership expenses for your residend or lot.	е. пісіцае пігят топдад	e payments and	4. \$	1,100.00

0.00

4a.

If not included in line 4:

4a.

Real estate taxes

Debtor 1 Davina Calavano Case number (if known) Case number (if known)

			Your e	xpenses
5. Additional mortgage payments for	or your residence, such as home equity loans	5.	\$	0.00
6. Utilities:				
6a. Electricity, heat, natural gas		6a.	\$	200.00
6b. Water, sewer, garbage collect	ion	6b.	\$	0.00
6c. Telephone, cell phone, Interne	et, satellite, and cable services	6c.	\$	80.00
6d. Other. Specify:		6d.	\$	0.00
7. Food and housekeeping supplies	s	7.	\$	500.00
8. Childcare and children's educati	on costs	8.	\$	0.00
9. Clothing, laundry, and dry cleani	ng	9.	\$	150.00
10. Personal care products and serv	ices	10.	\$	200.00
11. Medical and dental expenses		11.	\$	75.00
<ol> <li>Transportation. Include gas, main Do not include car payments.</li> </ol>	tenance, bus or train fare.	12.	\$	250.00
13. Entertainment, clubs, recreation	newspapers, magazines, and books	13.	\$	0.00
14. Charitable contributions and reli	gious donations	14.	\$	0.00
<ol> <li>Insurance.</li> <li>Do not include insurance deducted</li> </ol>	from your pay or included in lines 4 or 20.			
15a. Life insurance		15a.	\$	0.00
15b. Health insurance		15b.	\$	0.00
15c. Vehicle insurance		15c.	\$	150.00
15d. Other insurance. Specify:		15d.	\$	0.00
6. <b>Taxes.</b> Do not include taxes deductions.  Specify: Vehicle Registrations.	ted from your pay or included in lines 4 or 20.	16.	\$	25.00
17. Installment or lease payments:				
17a. Car payments for Vehicle 1		17a.	\$	0.00
17b. Car payments for Vehicle 2		17b.	\$	0.00
17c. Other. Specify:		17c.	\$	0.00
17d. Other. Specify:		17d.	\$	0.00
18. Your payments of alimony, main your pay on line 5, Schedule I, Yo	tenance, and support that you did not report as ded our Income (Official Form 106I).	ucted from	\$	0.00
19. Other payments you make to sur	pport others who do not live with you.			
	·	19.	\$	0.00
20. Other real property expenses no	t included in lines 4 or 5 of this form or on Schedule	e I: Your Income.		
20a. Mortgages on other property		20a.	\$	0.00
20b. Real estate taxes		20b.	\$	0.00
20c. Property, homeowner's, or rei	nter's insurance	20c.	\$	0.00
20d. Maintenance, repair, and upk		20d.		0.00
20e. Homeowner's association or o		20e.	\$	0.00

Debtor		Davina irst Name	Middle Name	Calavano Last Name	<u></u>	Case number (if know	vn)		
21. <b>O</b> 1	t <b>her</b> . Spe	ecify:					21.	+\$	0.00
22. <b>C</b> a	alculate <u>y</u>	your month	nly expenses.						
22	a. Add lii	nes 4 throuç	gh 21.				22a.	\$	2,742.81
22	b. Copy	line 22 (moi	nthly expenses f	or Debtor 2), if any, from O	Official Form 106J-2		22b.	\$	0.00
22	c. Add lir	ne 22a and	22b. The result i	s your monthly expenses.			22c.	\$	2,742.81
23. <b>Cal</b>	culate y	our monthl	y net income.						0.700.01
23a	. Сору	line 12 (you	ır combined moı	nthly income) from Schedu	le I.		23a.	\$	3,792.81
23b	. Сору	your month	ly expenses fror	n line 22c above.			23b.	<b>-</b> \$	2,742.81
23c	. Subtra	act your mo	nthly expenses	from your monthly income.				¢	1,050.00
	The re	esult is your	monthly net inc	ome.			23c.	Φ	1,000.00
For	example	e, do you ex	pect to finish pa	se in your expenses with ying for your car loan within ase because of a modificat	n the year or do you ex	cpect your			
	Yes.	Explain he	re:						

Fill in this in	formation to iden	tify your case:	
Debtor 1	Davina First Name	Middle Name	Calavano Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for	the: Eastern District of C	alifornia
Case number (If known)			

☐ Check if this is an amended filing

## Official Form 106Dec

## **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

I you pay or agree to pay someone who is	NOT an attorney to help you fill out bankruptcy forms?
No	
Yes. Name of person	
	Signature (Official Form 119).
	e read the summary and schedules filed with this declaration and
at they are true and correct.	e read the summary and schedules filed with this declaration and
der penalty of perjury, I declare that I have at they are true and correct.  /s/ Davina Calavano ignature of Debtor 1 - Davina Calavano	

Fill in this in	formation to identify <b>y</b>	our case:	
Debtor 1	Davina		Calavano
	First Name	Middle Name	Last Name
Debtor 2			
(Spouse, if filing)	First Name	Middle Name	Last Name
United States E	Bankruptcy Court for the:	Eastern District of Califor	nia
Case number (If known)			_

## ☐ Check if this is an amended filing

### Official Form 107

## Statement of Financial Affairs for Individuals Filing for Bankruptcy

04/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

<b>It is your current marit</b> Married	al status?			
Married Not married				
No	ve you lived anywhere s you lived in the last 3 y			
Debtor 1:		Dates Debtor 1 lived there	·	Dates Debtor 2 lived there
Number Street		. From To	Same as Debtor 1  Number Street	Same as Debtor 1  From  To
City	State ZIP Code	_	City State ZIP Code	
Number Street		. From To	Same as Debtor 1  Number Street	Same as Debtor 1  From  To
 City	State ZIP Code	_	City State ZIP Code	

Part 2: Explain the Sources of Your Income

Case number (if known)\_\_

Calavano

Did you have any income from employment Fill in the total amount of income you received If you are filing a joint case and you have income you have any income from employment you.	d from all jobs and all busi	inesses, including part-tir	ne activities.	ndar years?
<ul><li>□ No</li><li>☑ Yes. Fill in the details.</li></ul>				
	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions an exclusions)
From January 1 of current year until the date you filed for bankruptcy:	<ul><li>Wages, commissions, bonuses, tips</li><li>Operating a business</li></ul>	\$2,812.02	<ul><li>Wages, commissions, bonuses, tips</li><li>Operating a business</li></ul>	\$
For last calendar year: (January 1 to December 31,2020)	<ul><li>Wages, commissions, bonuses, tips</li><li>Operating a business</li></ul>	\$38,843.90	<ul><li>☐ Wages, commissions, bonuses, tips</li><li>☐ Operating a business</li></ul>	\$
For the calendar year before that: (January 1 to December 31, 2019	☐ Wages, commissions, bonuses, tips ☑ Operating a business	\$700.00	☐ Wages, commissions, bonuses, tips☐ Operating a business	\$
Did you receive any other income during the linclude income regardless of whether that incumen ployment, and other public benefit payments and letter unincipal.	come is taxable. Examples nents; pensions; rental inc	s of other income are alin ome; interest; dividends;	money collected from laws	suits; royalties; and
Include income regardless of whether that include income regardless of whether that include unemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from a No	come is taxable. Examples nents; pensions; rental inc g a joint case and you have	s of other income are alin ome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	suits; royalties; and
Include income regardless of whether that inc unemployment, and other public benefit paym gambling and lottery winnings. If you are filing List each source and the gross income from e	come is taxable. Examples nents; pensions; rental inc g a joint case and you have	s of other income are alin ome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once	suits; royalties; and
Include income regardless of whether that include income regardless of whether that include unemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from a No	come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. De	s of other income are alin ome; interest; dividends; e income that you receive	money collected from laws ed together, list it only once t you listed in line 4.	suits; royalties; and e under Debtor 1.  Gross income from each source
Include income regardless of whether that include income regardless of whether that include unemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from a No	come is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Debtor 1  Sources of income	Gross income from each source (before deductions and exclusions)	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income	Gross income from each source (before deductions an exclusions)
Include income regardless of whether that incunemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until	come is taxable. Examples nents; pensions; rental income is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Department of the pension o	Gross income from each source (before deductions and exclusions)  \$ 1,800.00	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions an exclusions)
Include income regardless of whether that inclunemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from a No Yes. Fill in the details.	come is taxable. Examples nents; pensions; rental income is taxable. Examples nents; pensions; rental income a joint case and you have each source separately. Department of the pension o	Gross income from each source (before deductions and exclusions)  \$ 1,800.00 \$	money collected from laws ed together, list it only once t you listed in line 4.  Debtor 2  Sources of income Describe below.	Gross income from each source (before deductions an exclusions)
Include income regardless of whether that inclunemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:  (January 1 to December 31,2020)	come is taxable. Examples nents; pensions; rental income is a joint case and you have each source separately. Department of the peach source separately. Department of the peach source of	Gross income from each source (before deductions)  \$	money collected from laws ed together, list it only once tyou listed in line 4.  Debtor 2  Sources of income Describe below.  Social Security	Gross income from each source (before deductions an exclusions)  \$
Include income regardless of whether that inclunemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:	come is taxable. Examples nents; pensions; rental income is a joint case and you have each source separately. Debtor 1  Sources of income Describe below.  CASH Act  CARES Act	Gross income from each source (before deductions)  \$	money collected from laws ed together, list it only once tyou listed in line 4.  Debtor 2  Sources of income Describe below.  Social Security	Gross income from each source (before deductions an exclusions)  \$
Include income regardless of whether that inclunemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:  (January 1 to December 31, 2020)	come is taxable. Examples nents; pensions; rental income is a joint case and you have each source separately. Department of the peach source separately. Department of the peach source of	Gross income from each source (before deductions)  \$	money collected from laws ed together, list it only once tyou listed in line 4.  Debtor 2  Sources of income Describe below.  Social Security  Social Security	Gross income from each source (before deductions an exclusions)  9.000  9.11,330.50
Include income regardless of whether that inclunemployment, and other public benefit paying gambling and lottery winnings. If you are filing List each source and the gross income from a No Yes. Fill in the details.  From January 1 of current year until the date you filed for bankruptcy:  For last calendar year:  (January 1 to December 31,2020)	come is taxable. Examples nents; pensions; rental income is a joint case and you have each source separately. Debtor 1  Sources of income Describe below.  CASH Act  CARES Act  Unemployment 2019 Tax Refund	Gross income from each source (before deductions and exclusions)  \$ 1,800.00 \$ 20,398.50 \$ 1,000.00	money collected from laws ed together, list it only once tyou listed in line 4.  Debtor 2  Sources of income Describe below.  Social Security  Social Security	Gross income from each source (before deductions an exclusions)  \$

Davina

Debtor 1

Debtor 1 Davina Calavano Case number (if known)\_\_\_\_\_\_

art 3:	List Certain Pa	yments You	Made Befor	e You Filed	for Bankruptcy		
Are eif	ther Debtor 1's or D	Debtor 2's deb	ts primarily c	onsumer debt	s?		
□ No						defined in 11 U.S.C. § 101(	8) as
	•	-	•	•	ousehold purpose." ay any creditor a total of \$6	\$ 925* or more?	
	_		ieu ioi bankiuļ	ncy, did you pa	ty arry creditor a total or po	,025 of more?	
	No. Go to line						
	total amo child sup	ount you paid the port and alimo	hat creditor. Do ny. Also, do no	o not include pa ot include paym	\$6,825* or more in one or a ayments for domestic supponents to an attorney for this at for cases filed on or afte	oort obligations, such as s bankruptcy case.	
<b>☑</b> Ye	es. <b>Debtor 1 or Deb</b> t	or 2 or both h	ave primarily	consumer del	bts.		
	During the 90 day	s before you fi	led for bankrup	otcy, did you pa	ay any creditor a total of \$6	i00 or more?	
	☐ No. Go to line	7.					
	creditor.	Do not include	payments for	domestic supp	\$600 or more and the total ort obligations, such as chiey for this bankruptcy case.	ild support and	
				Dates of payment	Total amount paid	Amount you still owe	Was this payment for.
	Capital O	ne Auto Fina	ance	Monthly	\$1,470.06	\$15,183.53	Mortgage
	P.O. Box	259407					Car
	Number Stree	et .					☐ Credit card ☐ Loan repayment
							☐ Suppliers or vendo
	Plano	TX	75025				Other
		State	ZIP Code				— outer
	City						
		acation Club	) Dues	Monthly	\$ 1,060.56	\$ 14,715.36	☐ Mortgogo
		acation Club	Dues	Monthly	\$1,060.56	\$14,715.36_	☐ Mortgage
	Disney Volume Disney Volume Disney Volume Volume Disney Di	twork Place		Monthly	\$1,060.56	\$14,715.36_	☑ Car
	Disney V	twork Place		Monthly	\$ 1,060.56	\$ 14,715.36	Car Credit card
	Disney Volume Disney Volume Disney Volume Volume Disney Di	twork Place		Monthly	\$1,060.56	\$14,715.36	Car Credit card Loan repayment
	Disney Vicreditor's Name 28397 Ne Number Stree Chicago	twork Place	60673	Monthly	\$ 1,060.56	\$14,715.36	Car Credit card Loan repayment Suppliers or vendo
	Disney Volume Vo	twork Place		Monthly	\$ 1,060.56	\$ <u>14,715.36</u>	Car Credit card Loan repayment Suppliers or vendo
	Disney Volume Vo	twork Place the CA State	60673 ZIP Code	Monthly	\$ 1,060.56 \$ 423.00		Car Credit card Loan repayment Suppliers or vendo Other Mortgage
	Disney Vicreditor's Name 28397 Ne Number Stree Chicago City  Evergreer Creditor's Name	twork Place the CA State  7 / Freedom ofessional C	60673 ZIP Code				Car Credit card Loan repayment Suppliers or vendo Other
	Disney Volume Vo	twork Place the CA State  n / Freedom ofessional Cet	60673 ZIP Code				Car Credit card Loan repayment Suppliers or vendo Other Mortgage Car Credit card Loan repayment
	Disney Volume Tender Street Chicago City  Evergreer Creditor's Name 10509 Pro Number Street Street Creditor's Street Chicago City Creditor's Name Street Creditor's Street Cre	twork Place the CA State  n / Freedom ofessional Cet	60673 ZIP Code				Car Credit card Loan repayment Suppliers or vendo Other Mortgage Car Credit card

Calavano

r 1	Davina	Calavano		-	Case number (if known)	
	First Name Middle Name	Last Name				
	in 1 year before you filed					
corpo	orations of which you are a	n officer, director, pers	on in control, o	r owner of 20% or i	more of their voting	h you are a general partner; securities; and any managing r domestic support obligations,
	as child support and alimo		ole proprietor.	11 0.0.0. 8 101. 11	icidde payments for	domestic support obligations,
<b>y</b> N						
U Y	es. List all payments to an	insider.	Dates of	Total amount	Amount you still	Reason for this payment
			payment	paid	owe	
	Incidada Nomo			\$	\$	
	Insider's Name					
	Number Street					
	City	State ZIP Code				
	Only	State Zii Sode				
	Insider's Name			\$	\$	
	Number Street					
	Number Street					
	City	State ZIP Code				
an in	in 1 year before you filed nsider? de payments on debts gua			payments or trans	fer any property o	n account of a debt that benefited
<b>y</b> N	No					
<b>□</b> Y	es. List all payments that t	enefited an insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
				\$	\$	
	Insider's Name			Ψ	- V	
	Number Street					
_	City	State ZIP Code				
				\$	\$	
	Insider's Name					
	Number Street					
	City	State ZIP Code				

Davina

Calavano Davina Debtor 1 Case number (if known)\_ First Name Middle Name Part 4: **Identify Legal Actions, Repossessions, and Foreclosures** 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. ☐ No Yes. Fill in the details. Nature of the case Status of the case Court or agency Superior Court of California Civil Lawsuit County of Sacramento Case title Pacific Coast Iron, LLC Pending **Breach of Contract** Court Name On appeal Money Damages v. Davina Calavano 720 Ninth Street ☐ Concluded Number Street Case number 34-2019-00258592 Sacramento 95814 CA State ZIP Code Pending Case title\_ Court Name On appeal ☐ Concluded Number Street Case number City State ZIP Code 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. ☐ Yes. Fill in the information below. Describe the property Date Value of the property

Creditor's Name			\$
Number Street  City State ZIP Code	Explain what happened  Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied.		
Creditor's Name	Describe the property	Date	Value of the property
Number Street  City State ZIP Code	Explain what happened  Property was repossessed. Property was foreclosed. Property was garnished. Property was attached, seized, or levied.		

Calavano

First Name Middle Name Last Nam	е		
ithin 90 days before you filed for bankrupto	y, did any creditor, including a	bank or financial institution, set off any	amounts from you
counts or refuse to make a payment becau		•	•
No			
Yes. Fill in the details.			
	Describe the action the creditor to	ok Date action	Amount
	Describe the action the creditor to	was taken	Amount
Creditor's Name			
			\$
Number Street			
L			
City State ZIP Code	Last 4 digits of account number:	XXXX	
	-		
ithin 1 year before you filed for bankruptcy	was any of your property in th	a nossession of an assignee for the be	nefit of
itnin 1 year before you filed for bankruptcy editors, a court-appointed receiver, a custo		e possession of an assignee for the be	netit of
	diali, or allottier official?		
No			
Yes			
5: List Certain Gifts and Contribution	nne .		
Jist Gertain Girts and Gontribution	,,,,		
thin 2 years before you filed for bankruptc	ر, did you give any gifts with a ا	otal value of more than \$600 per perso	n?
Í No			
Yes. Fill in the details for each gift.			
Gifts with a total value of more than \$600	Describe the gifts	Dates you ga	ve Value
per person	Describe the girts	the gifts	ve value
			¢
Person to Whom You Gave the Gift			Φ
			•
			\$
Number Street			
City State ZIP Code			
Person's relationship to you			
Gifts with a total value of more than \$600	Describe the gifts	Dates you ga	ve Value
per person		the gifts	
Person to Whom You Gave the Ciff			\$
Person to Whom You Gave the Gift			
			\$
Number Street			
City State ZIP Code			
Porcon's relationship to you			
Person's relationship to you			

Davina

ibution.		
Describe what you contributed	Date you contributed	Value
		\$
		\$
ey or since you filed for bankruptcy, did you lose anything  Describe any insurance coverage for the loss	because of theft, f	fire, other  Value of proper
Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your	Value of proper
Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your	Value of proper lost
Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance	Date of your	Value of proper lost
Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.	Date of your loss	Value of proper lost
Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Sifers  Ey, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?	Date of your loss	Value of proper lost
Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Sters Ey, did you or anyone else acting on your behalf pay or transport the steril property in the steril property.	Date of your loss	Value of proper lost
Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Sifers  Ey, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?	Date of your loss	Value of proper lost
Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Sifers  Ey, did you or anyone else acting on your behalf pay or transpreparing a bankruptcy petition?	Date of your loss  nsfer any property our bankruptcy.  Date payment or transfer was	Value of proper lost
Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Sifers  Ey, did you or anyone else acting on your behalf pay or training repearing a bankruptcy petition?  parers, or credit counseling agencies for services required in your behalf pay or training parers.  Description and value of any property transferred  \$0.00 - Attorney's Fees	Date of your loss  nsfer any property our bankruptcy.  Date payment or	Value of proper lost  \$  To anyone  Amount of payn
Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Sefers  Ey, did you or anyone else acting on your behalf pay or transfer preparing a bankruptcy petition?  parers, or credit counseling agencies for services required in your behalf pay or transferred  Description and value of any property transferred  \$0.00 - Attorney's Fees \$20.00 - Credit Counseling	Date of your loss  nsfer any property our bankruptcy.  Date payment or transfer was	Value of proper lost  \$  to anyone
Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property.  Sifers  Ey, did you or anyone else acting on your behalf pay or training repearing a bankruptcy petition?  parers, or credit counseling agencies for services required in your behalf pay or training parers.  Description and value of any property transferred  \$0.00 - Attorney's Fees	Date of your loss  Insfer any property our bankruptcy.  Date payment or transfer was made	Value of proper lost  \$  To anyone  Amount of payn

tor 1	Davina	C	Calavano		Case number (if known)		
	First Name	Middle Name La	st Name				
-						_	
			Description and v	alue of any property tr	ansferred	Date payment or transfer was made	Amount of payment
	Person Who Was Pa	aid					
	New horas Observe						\$
	Number Street						\$
			_				
	City	State ZIP Code					
	Email or website add	dress					
	Person Who Made t	he Payment, if Not You	-				
V		payment or transfer that etails.	you listed on line 16.				
			Description and v	alue of any property tr	ansferred	Date payment or transfer was made	Amount of paym
	Person Who Was P	Paid	_			made	
	Number Street						\$
							\$
	City	State ZIP Code					
Included Inc	nsferred in the outright not include gifts a	ore you filed for bankru ordinary course of you it transfers and transfers and transfers that you h	r business or finances made as security (su	ial affairs? ich as the granting of			
_	res. i ili ili ule uc		Description and v	alue of property	Describe any property	or navments received	Date transfe
_			Description and v transferred	alue of property	Describe any property or debts paid in excha		Date transferwas made
	Person Who Receive			alue of property			
				alue of property			
	Person Who Receive			alue of property			
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-	Person Who Received  Number Street  City  Person's relations  Person Who Received	ed Transfer State ZIP Code	transferred	alue of property			

			alavano	Case number (ii	(MIOWII)	
	First Name M	Middle Name Last I	Name			
Within	10 years before	vou filed for hankru	ptcy, did you transfer any proper	ty to a solf-sottlad t	rust or similar device of w	which you
	-	-	sset-protection devices.)	ty to a sen-settled th	rust of Sillillar device of w	vilicii you
			seet protection devices,			
☐ No						
<b>∠</b> Yes	s. Fill in the detai	IS.				
			Description and value of the prope	erty transferred		Date transfer
						was made
Nan	me of trust		_			
			-			
w4 O	Liet Certein E	inencial Account	s, Instruments, Safe Deposit	Payes and Star	ana Unita	
III OH	List Certain F	inanciai Account	s, instruments, sare beposit	boxes, and Store	age Units	
			cy, were any financial accounts o	or instruments held	in your name, or for your	benefit,
	l, sold, moved, c					
			or other financial accounts; cert		shares in banks, credit un	nions,
	-	nsion funds, coopera	atives, associations, and other fi	nancial institutions.		
<b>☑</b> No						
<b>□</b> Yes	s. Fill in the deta	ails.				
			Last 4 digits of account number	Type of account or	Date account was	Last balance befo
				instrument	closed, sold, moved, or transferred	closing or transfe
					or transferred	
Na	ame of Financial Insti	itution	XXXX	☐ Checking		¢
			*****	☐ Savings		Ψ
Nu	umber Street					\$
				Money market		-
				☐ Brokerage		
Cit	ity	State ZIP Code		☐ Other	-	
Cit	ity	State ZIP Code		Other		
			XXXX	Other		\$
	ame of Financial Insti		XXXX			\$
Na	ame of Financial Insti		xxxx	☐ Checking ☐ Savings		\$
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Na	ame of Financial Insti		XXXX	☐ Checking ☐ Savings ☐ Money market ☐ Brokerage		\$
Na	ame of Financial Insti umber Street		xxxx	☐ Checking ☐ Savings ☐ Money market		\$

☑ No	First Name Middle Name			Case number (if known)	
☑ No		e Last Name			
☑ No				and the face of the state of th	( -
_	u stored property in a	storage unit or place other than	i your nome within 1 y	ear before you filed for bankrup	tcy?
	Fill in the details.				
	i iii iii dio dotallo.	Who else has or h	nad access to it?	Describe the contents	Do you still
					have it?
					□ No
Nan	me of Storage Facility	Name			Yes
Nur	mber Street	Number Street			
		City State ZIP Code			
City	y State	ZIP Code			
Part 9:	Identify Property	You Hold or Control for Sc	omeone Else		
23. Do you	hold or control any pr	roperty that someone else owns	s? Include any propert	y you borrowed from, are storin	g for,
	in trust for someone.				
☑ No					
☐ Yes	. Fill in the details.		. •	<b>5</b>	
		Where is the prope	erty?	Describe the property	Value
Ow	ner's Name				\$
Non		Number Street			
	mber Street				
Nui					
City	y State	ZIP Code	State ZIP Code		
City	■	ZIP Code			
	■	ZIP Code City  out Environmental Informat			
City Part 10:	Give Details Abo	ZIP Code			
City Part 10: For the pur  Environ	Give Details Aborpose of Part 10, the formental law means any	out Environmental Informations apply: y federal, state, or local statute	or regulation concern	ing pollution, contamination, rel	
City  Part 10:  For the pure Environ hazardo	Give Details Aborpose of Part 10, the formental law means anyous or toxic substance	out Environmental Informational Collowing definitions apply: y federal, state, or local statute es, wastes, or material into the	or regulation concern	water, groundwater, or other me	
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Part 10:  For the pur  Environ hazardo includir  Site me	Give Details About pose of Part 10, the formental law means any ous or toxic substanceing statutes or regulationans any location, facil	out Environmental Information of the second	or regulation concern air, land, soil, surface these substances, was er any environmental la	water, groundwater, or other me	edium,
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For the pure Environ hazardo includir  Site me utilize it Hazardo substar  Report all 124. Has any	Give Details Aborpose of Part 10, the formental law means any ous or toxic substanceing statutes or regulations any location, facility to rused to own, oper ous material means are nee, hazardous material notices, releases, and y governmental unit not	put Environmental Informational Programmental Informational Programmental Informational Programmental Informational Programmental Informational Programmental Informational Programmental Informational Informationa	or regulation concern air, land, soil, surface these substances, was er any environmental la osal sites. efines as a hazardous milar term.	water, groundwater, or other me tes, or material. aw, whether you now own, oper waste, hazardous substance, to n they occurred.	edium, ate, or xic
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otor 1	Davina		Ca	lavano		Case number	(if known)	
	First Name	Middle Name	Last	Name				
Hav	e vou notified an	/ governme	ntal unit o	f any release of hazardous m	aterial?			
		y governme	itai aiiit o	any roloude of mazaradus in	atoriai i			
Ø								
ч	Yes. Fill in the de	tails.						
				Governmental unit	E	Environmental law	, if you know it	Date of notice
	Name of site			Governmental unit				
				Oovernmentar unit				
	Number Street			Number Street				
				City State ZIP Cod	de			
	City	State	ZIP Code					
· Llov	a way baan a nari	u in any iud	ioial ar ad	ministrativa proceeding unde		nvironmontal la	w2 Include cottlements o	and ardere
		y iii ariy juu	iciai di du	ministrative proceeding unde	any e	nvironnientai la	w: moidde settlements a	ilia Ulueis.
Ø								
	Yes. Fill in the de	tails.						
				Court or agency		Nature of the	case	Status of the case
	<b>-</b>							, , , , ,
	Case title			Court Name				☐ Pending
				Court Name				On appeal
				Number Street				Concluded
				Number Offeet				Concluded
	Case number							
				City State Z	IP Code			
						_		
art 1				siness or Connections to	_			
				otcy, did you own a business				business?
				in a trade, profession, or oth			ne or part-time	
			-	pany (LLC) or limited liability	partner	ship (LLP)		
	A partner in a							
				ecutive of a corporation				
	■ An owner of a	it least 5% c	f the votir	ng or equity securities of a co	rporatio	on		
	No. None of the a	bove applie	s. Go to P	art 12.				
				in the details below for each	busine	ss.		
	Davina Calav	ano		Describe the nature of the bu	siness		Employer Identification nu	mber
	Business Name	ai 10					Do not include Social Secu	rity number or ITIN.
		<b>.</b>		Adult Entertainer			=	
	6812 Bender	Court					EIN:	
	Number Street			Name of accountant or book	eener		Dates business existed	
				or accountant of books	.50001		- atoo addiiioda Galated	
	Sacramente	CA	95820				From 1997 To 03	3/2020
	Sacramento		9582U ZIP Code				10 33	
	ony	Glate	Lii Ooue	Describe the nature of the bu	siness		Employer Identification nu	mber
				20001100 the mature of the bu			Do not include Social Secu	
	Business Name							,
							EIN:	
	Number Street			Name of			Detec husiness 1.4.1	
				Name of accountant or book	eeper		Dates business existed	
							From To	
	City	State	ZIP Code					

Debtor 1	Davina Cal	avano	Case number (if known)				
	First Name Middle Name Last N	ame					
		Describe the nature of the business	Employer Identification number				
			Do not include Social Security number or ITIN.				
	Business Name						
			EIN:				
	Number Street	Name of accountant or bookkeeper	Dates business existed				
			From To				
	City State ZIP Code		FIOIII 10				
	ony state in code						
inst	titutions, creditors, or other parties.	cy, did you give a financial stateme	nt to anyone about your business? Include all financial				
		Date issued					
		Buto location					
	Name	MM / DD / YYYY					
	Number Chart						
	Number Street						
	City State ZIP Code						
	·						
Part 1	2: Sign Below						
rait	3igii below						
an in		that making a false statement, con	nents, and I declare under penalty of perjury that the cealing property, or obtaining money or property by fraud prisonment for up to 20 years, or both.				
<u> </u>	s/ Davina Calavano	×					
	Signature of Debtor 1 - Davina Calavano	Signature of Debtor 2					
	Date 01/20/2021	Date					
			_				
Di	d you attach additional pages to <i>Your</i> S	tatement of Financial Affairs for Indi	viduals Filing for Bankruptcy (Official Form 107)?				
	f No.						
Ø	· · · · ·						
	Yes						
Di	d you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?						
	I No						
Ц	Yes. Name of person		Attach the Bankruptcy Petition Preparer's Notice,				
			Declaration, and Signature (Official Form 119).				

	UNITED STATES BANKRUPTCY COURT EASTERN DISTRICT OF CALIFORNIA						
In re	Davina Calavano		Case Number:				
	Debtor(s)	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR					

lr	In re Davina Calavano		Case Number:
			DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR
		Debtor(s)	
١.	that ser	rsuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I cent compensation paid to me within one year before the filing of the vices rendered or to be rendered on behalf of the debtor(s) in cofollow:	e petition in bankruptcy, or agreed to be paid to me, for
		For legal services, I have agreed to accept	\$ 4,000.00
		Prior to the filing of this statement I have received	' <del></del>
		Balance Due	4 000 00
			· <del></del>
<u>.</u> .	The	e source of the compensation paid to me was:	
	<b>'</b>	Debtor Other (specify)	
	<b>T</b> I		
5.	1 ne	e source of compensation to be paid to me is:	
	<b>'</b>	Debtor Other (specify)	
١.	<b>v</b>	I have not agreed to share the above-disclosed compensation associates of my law firm.	with any other person unless they are members and
		I have agreed to share the above-disclosed compensation with my law firm. A copy of the agreement, together with a list of th attached.	
5.	ln r	eturn for the above-disclosed fee, I have agreed to render legal	service for all aspects of the bankruptcy case, including:
	a.	Analysis of the debtor's financial situation, and rendering advic bankruptcy;	e to the debtor in determining whether to file a petition in
	b.	Preparation and filing of any petition, schedules, statement of a	affairs and plan which may be required;
	С	Representation of the debtor at the meeting of creditors and co	onfirmation hearing, and any adjourned hearings thereof:

- Representation of the debtor in contested bankruptcy matters;
- e. [Other provisions as needed]

6.	By agreement with the debtor(s), the above-disclosed fee does not include the following services, insofar as these services are
	not mandated by Local Rule 2017-1 of the Eastern District of California.

### **CERTIFICATION**

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

January 20, 2021

Date

/s/ Mark Shmorgon

Signature of Attorney - Mark Shmorgon

Law Offices of Mark Shmorgon 5015 Madison Ave., Suite A Sacramento, CA 95841

Phone: 916-640-7599; Email: shmorgonlaw@gmail.com

Name of Law Firm

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

# The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11— Reorganization
- Chapter 12— Voluntary repayment plan for family farmers or fishermen
- Chapter 13— Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7:		Liquidation		
	\$245	filing fee		
		administrative fee		
+	\$15	trustee surcharge		
	\$335	total fee		

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law.

Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

### **Chapter 11: Reorganization**

\$1,167 filing fee

+ \$550 administrative fee

\$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

# Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	¢210	total foo

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### **Warning: File Your Forms on Time**

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_form\_s.html#procedure.

# Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

# Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition* for *Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Fill in this information to identify your case:							
Debtor 1	Davina First Name	Middle Name	Calavano Last Name				
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name				
United States E	United States Bankruptcy Court for the: Eastern District of California						
Case number (If known)							

Check as directed in lines 17 and 21:						
According to the calculations required by this Statement:						
1. Disposable income is not determined under 11 U.S.C. § 1325(b)(3).						
2. Disposable income is determined under 11 U.S.C. § 1325(b)(3).						
3. The commitment period is 3 years.  4. The commitment period is 5 years.						
Check if this is an amended filing						

### Official Form 122C-1

# Chapter 13 Statement of Your Current Monthly Income and Calculation of Commitment Period

10/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known).

P	art 1: Calculate Your Average Monthly Income	<b>)</b>						
1.	What is your marital and filing status? Check one only.  Not married. Fill out Column A, lines 2-11.  Married. Fill out both Columns A and B, lines 2-11.							
	Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.							
					Column A Debtor 1	Column B Debtor 2 or non-filing spouse		
	Your gross wages, salary, tips, bonuses, overtime, and payroll deductions).	II	\$ 5,640.65 \$ 0.00	\$ \$				
3.	Alimony and maintenance payments. Do not include pay	ments from a	a spouse.		\$0.00	\$		
4.	All amounts from any source which are regularly paid for you or your dependents, including child support. Include an unmarried partner, members of your household, your de roommates. Do not include payments from a spouse. Do not listed on line 3.		\$0.00	\$				
5.	Net income from operating a business, profession, or farm	Debtor 1	Debtor 2					
	Gross receipts (before all deductions)	\$	\$					
	Ordinary and necessary operating expenses	<b>-</b> \$	<b>-</b> \$					
	Net monthly income from a business, profession, or farm	\$	\$	Copy here →	\$0.00	\$		
6.	Net income from rental and other real property	Debtor 1	Debtor 2					
	Gross receipts (before all deductions)	\$	\$					
	Ordinary and necessary operating expenses	<b>-</b> \$	- \$					
	Net monthly income from rental or other real property	\$	\$	Copy here→	\$0.00	\$		

Debtor 1

Davina		Calavano
irst Name	Middle Name	Last Name

Case number (if known)			
	Case number	(known)	

		Column A Debtor 1	Column B Debtor 2 or non-filing spouse	
7.	Interest, dividends, and royalties	\$0.00	\$	
8.	Unemployment compensation	\$ <u>1,551.50</u>	\$	
	Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here:			
	For you\$ 1,551.50			
	For your spouse			
9.	Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act. Also, except as stated in the next sentence, do not include any compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If you received any retired pay paid under chapter 61 of title 10, then include that pay only to the extent that it does not exceed the amount of retired pay to which you would otherwise be entitled if retired under any provision of title 10 other than chapter 61 of that title.	\$0.00	\$	
10.	Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act; payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism; or compensation, pension, pay, annuity, or allowance paid by the United States Government in connection with a disability, combat-related injury or disability, or death of a member of the uniformed services. If necessary, list other sources on a separate page and put the total below.			
		\$0.00	\$	
		\$0.00	\$	
	Total amounts from separate pages, if any.	+ \$0.00	+ \$	
11.	Calculate your total average monthly income. Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.	\$7,192.15	+ <sub>\$N/A-</sub>	\$7,192.15  Total average monthly income
Pa	Determine How to Measure Your Deductions from Income			
12.	Copy your total average monthly income from line 11.			\$ 7,192.15
13.	Calculate the marital adjustment. Check one:			*
	You are not married. Fill in 0 below.			
	You are married and your spouse is filing with you. Fill in 0 below.			
	You are married and your spouse is not filing with you.  Fill in the amount of the income listed in line 11, Column B, that was NOT regularly	paid for the househ	old expenses of	
	you or your dependents, such as payment of the spouse's tax liability or the spouse you or your dependents.	e's support of somed	one other than	
	Below, specify the basis for excluding this income and the amount of income devote list additional adjustments on a separate page.	ed to each purpose.	If necessary,	
	If this adjustment does not apply, enter 0 below.			
		\$	-	
		\$	-	
		+\$	¬	0.00
	Total	. \$0.00	Copy here	0.00
14.	Your current monthly income. Subtract the total in line 13 from line 12.			\$_7,192.15

Case 21-20174

Doc 1

Davina Calavano Debtor 1 Case number (if known) Middle Name Last Name 15. Calculate your current monthly income for the year. Follow these steps: 7,192.15 15a. Copy line 14 here 🗲 Multiply line 15a by 12 (the number of months in a year). 12 \$ 86,305.80 15b. The result is your current monthly income for the year for this part of the form. 16. Calculate the median family income that applies to you. Follow these steps: CA 16a. Fill in the state in which you live. 3 16b. Fill in the number of people in your household. 16c. Fill in the median family income for your state and size of household. \$ 91,605.00 To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 17. How do the lines compare? 17a. 🖊 Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined under 11 U.S.C. § 1325(b)(3). Go to Part 3. Do NOT fill out Calculation of Your Disposable Income (Official Form 122C-2). 17b. Line 15b is more than line 16c. On the top of page 1 of this form, check box 2, Disposable income is determined under 11 U.S.C. § 1325(b)(3). Go to Part 3 and fill out Calculation of Your Disposable Income (Official Form 122C-2). On line 39 of that form, copy your current monthly income from line 14 above. Part 3: Calculate Your Commitment Period Under 11 U.S.C. § 1325(b)(4) 18. Copy your total average monthly income from line 11. \$ 7,192.15 19. Deduct the marital adjustment if it applies. If you are married, your spouse is not filing with you, and you contend that calculating the commitment period under 11 U.S.C. § 1325(b)(4) allows you to deduct part of your spouse's income, copy the amount from line 13. 19a. If the marital adjustment does not apply, fill in 0 on line 19a. 0.00 19b. Subtract line 19a from line 18. \$ 7,192.15 20. Calculate your current monthly income for the year. Follow these steps: 20a. Copy line 19b..... \$ 7,192.15 **x** 12 Multiply by 12 (the number of months in a year). 20b. The result is your current monthly income for the year for this part of the form. \$ 86,305.80 20c. Copy the median family income for your state and size of household from line 16c...... \$ 91,605.00 21. How do the lines compare? Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4. Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.

Debtor 1 Davina Calavano Case number (if known)\_\_\_\_\_

	First Name	Middle Name	Last Name	
Part 4:	Sign Belov	w		
	By signing h	iere, under penalt	y of perjury I declare that the	e information on this statement and in any attachments is true and correct.
	🗶 /s/ Dav	vina Calavano		×
	Signature	of Debtor 1 - Davina	a Calavano	Signature of Debtor 2
		/20/2021 / DD / YYYY		Date
	•	•	ill out or file Form 122C–2. rm 122C–2 and file it with thi	is form. On line 39 of that form, copy your current monthly income from line 14 above.